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# HEARINGS

BEFORE THE

SPECIAL COMMITTEE APPOINTED BY THE SPEAKER,  
UNDER A RESOLUTION OF THE HOUSE OF  
REPRESENTATIVES, FIFTY-NINTH  
CONGRESS,

TO MAKE

A FULL AND COMPLETE INVESTIGATION OF THE  
MANAGEMENT OF THE GOVERNMENT  
HOSPITAL FOR THE INSANE.

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IN TWO PARTS.

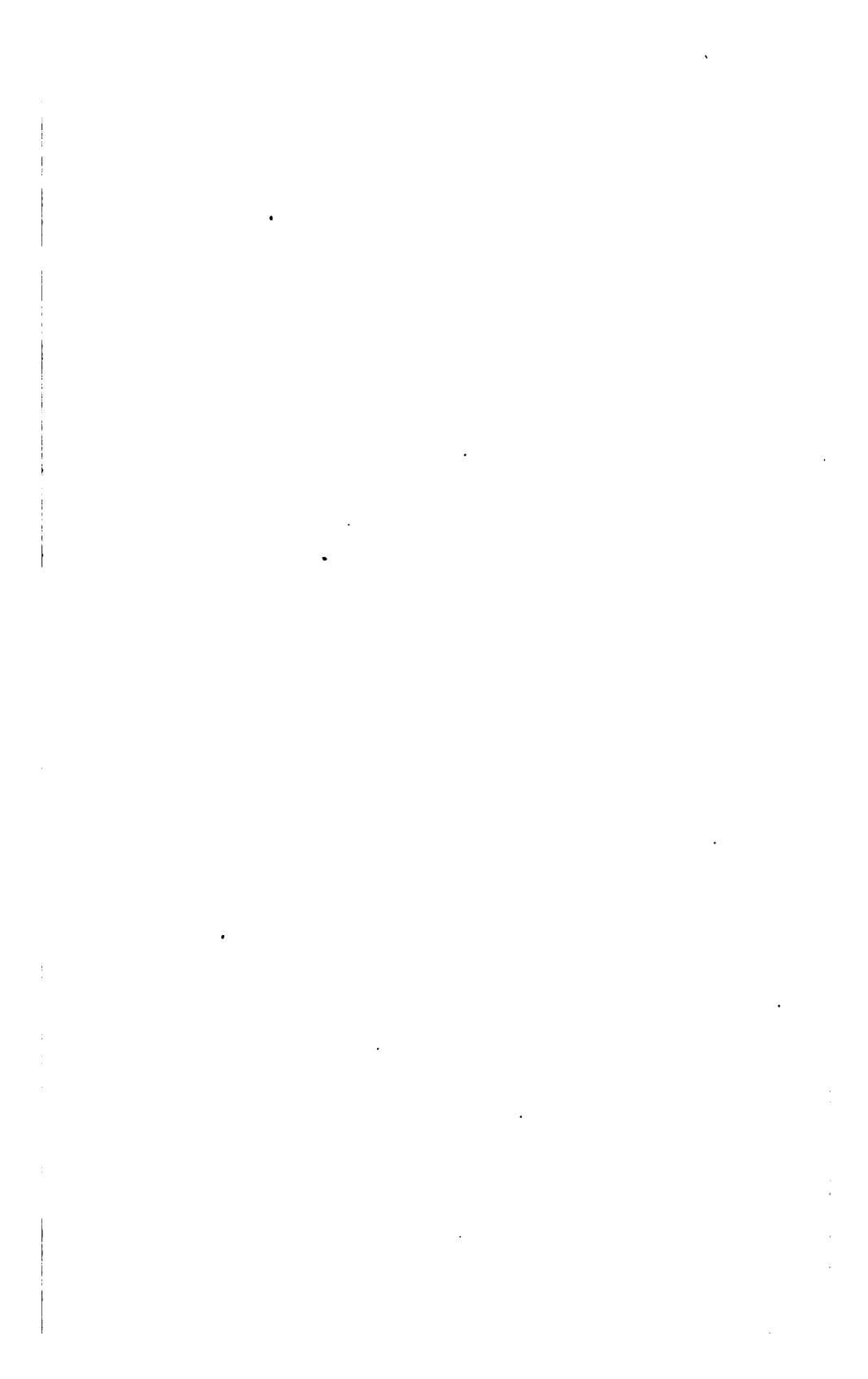
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#### ADDITIONAL TESTIMONY OF DR. F. M. GUNNELL.

Dr. F. M. GUNNELL, having been previously sworn, was examined and testified as follows:

DR. GUNNELL. Mr. Chairman, may I say one word?

The CHAIRMAN. Certainly.

Dr. GUNNELL. From my long experience with the hospital I wanted to tell you how it came to be called St. Elizabeth's, unless there is objection

The CHAIRMAN. We do not know that. We will be glad to have you make the statement.

Dr. GUNNELL. I will not tell it, of course, if there is any objection.

The CHAIRMAN. We will be glad to hear you.

Dr. GUNNELL. During the war, just as Dr. Nichols had completed one of the east buildings, adjoining the main building, there were a great many invalids who had lost legs and arms, and Mr. Jewett, of New York, who had the patent for the artificial arms and limbs was appointed by the Government to come here, and he took the basement of that building for his headquarters, and all such sufferers were ordered here to be fitted with new arms and legs—about 100 people were sent here and Dr. Nichols was appointed a surgeon in the Army with authority over this man.

The quartermaster immediately assigned wagons to bring over the supplies, and upon the wagons appeared "Government Hospital for the Insane;" whereupon the invalids raised up and said that they did not want it to appear that they were over at the crazy house, and they would not stand it. Then Dr. Nichols discovered that all this grant of land around here, in the old times when we lived under the King, was called St. Elizabeth's, after the saint who had been so kind in helping the sick, and so he proposed to call the army hospital St. Elizabeth's. That took immediately. Everybody thought it was a beautiful idea. So they put it upon the wagons that came from St. Elizabeth's, and by and by when the post-office was established there it was called St. Elizabeth's, too, and the name has remained.

In regard to the question that Mr. Hay asked Mr. Maury, I think the Doctor has covered that in his testimony. The action in dealing with all these employees is in the hands of the superintendent, under authority from the board. He reports these matters to the board and the board approves them, but the Doctor has to appoint the attendants there. He has a certain number that have to be employed, and he fixes really their compensation under our general approval.

**TESTIMONY OF BRIG. GEN. JOHN MOORE, U. S. ARMY.**

Brig. Gen. JOHN MOORE, U. S. Army, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. General, you are one of the visitors of St. Elizabeth's, are you not?

General MOORE. Yes, sir.

The CHAIRMAN. And you are also an officer in the Army, retired?

General MOORE. I am a retired officer in the Army, yes.

The CHAIRMAN. Is there anything particularly that you would like to state in regard to your connection with St. Elizabeth's?

General MOORE. I do not know of anything. I think all that can be said about St. Elizabeth's has been said by Mr. Maury and the president of the board, Dr. Gunnell. I do not know what I could say in addition to what they have said. I have been connected, as a visitor there, for nineteen years, and they have told the days of visiting and all that. I think each member goes there about three or four times a year. There are nine members of the board, and three go there every month. I have been doing that for nineteen years, and going through the hospital, as Judge Maury has said. We formerly went through all of the wards, until the new buildings were established, and we have had these visits every three months. I do not think I ever observed anything there that has not been gone over by the previous witnesses.

The CHAIRMAN. I think that is all, then, General. We are much obliged to you for coming.

**TESTIMONY OF WALTER WYMAN.**

WALTER WYMAN, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. General Wyman, you are one of the visitors at St. Elizabeth's Asylum?

Mr. WYMAN. Yes, sir.

The CHAIRMAN. And you are——

Mr. WYMAN. Surgeon-General, Public Health and Marine-Hospital Service.

The CHAIRMAN. Do you frequently go over to St. Elizabeth's?

Mr. WYMAN. You asked me if I frequently go over?

The CHAIRMAN. Yes.

Mr. WYMAN. Yes, sir; I might say frequently. That is somewhat of a relative term, however. I go six or seven or eight times a year, I suppose, and I am in touch with the president of the board and also with the superintendent. I frequently have communication with them, either by telephone or by meeting them in the city, and discussing the affairs of the hospital.

The CHAIRMAN. Is there anything else you would like to say to the committee, in connection with this matter, that has not been covered by Dr. Gunnell or Mr. Maury?

Mr. WYMAN. In addition to my visits to the hospital I hear of it through one of my officers who is detailed occasionally to inspect and visit the patients of the Marine-Hospital Service that are there, and also through some of the scientific gentlemen connected with the laboratory, who in the past have visited the institution for the purpose of conducting certain scientific investigations, and through them

I have heard of the general condition of the hospital—through these gentlemen.

The CHAIRMAN. Yes.

Mr. WYMAN. And I have always heard it spoken of in a highly commendatory vein, so that I have had nothing to arouse my suspicion as to anything being wrong at the Government Hospital for the Insane, I might also add, if it is not out of place, that we feel fortunate—and I am sure the board of visitors will agree with me in this—in the fact that we have as superintendent Dr. White, who is a man of just the right age to stand the strain of the institution, and of the mental attitude and experience which enables him to conduct it; that it is a most difficult position to maintain, but that he does maintain it we believe in a very effective manner. I have been interested in his improvements in the internal organization of the institution, and, so far as I could observe and learn, his powers of organization are great, and his administrative ideas are excellent, and I think he has made a great many improvements in the administration of the hospital.

The CHAIRMAN. Did I understand you to say that you detailed one of your staff to go there?

Mr. WYMAN. To go over and summon before him the patients that we have there, the insane patients that go from the Marine-Hospital Service.

Mr. HAY. General, what do you think as to the advisability of a lunacy commission?

Mr. WYMAN. I do not think I could answer that question, Mr. Hay. I think that would require a good deal of consideration, which I have not given it.

Mr. HAY. What character of inspection do you require as to the hospitals over which you preside, in your department?

Mr. WYMAN. We require in every hospital a weekly inspection of the hospital by the medical officer in command. Then we require an annual inspection of the hospital by some one from Washington, or some officer detailed from Washington for that special purpose.

Mr. HAY. And when that inspection is to be had, are the authorities of the hospitals notified of the day when it is to take place?

Mr. WYMAN. The weekly inspection is at a given time. The other inspection is not.

Mr. HAY. Why do you not notify them of the date when you are going to have the annual inspection?

Mr. WYMAN. Because we want them to be taken by surprise.

Mr. HAY. By surprise?

Mr. WYMAN. Yes, sir.

Mr. HAY. Do you not think any great institution such as the Government Hospital for the Insane should be subject to some inspection of the character of which you have just spoken?

Mr. WYMAN. I believe in inspections, and I think they do a great deal of good. An annual inspection or an occasional inspection of St. Elizabeth's would not do any harm. I believe every public institution should be subject to inspection as often as it seems desirable.

Mr. HAY. As a matter of fact this hospital has not been subject to any inspection of that kind, has it?

Mr. WYMAN. Well, of the kind that I spoke of?

Mr. HAY. Yes.

Mr. WYMAN. The kind of inspection that is given at our hospitals?

Mr. HAY. Yes.

Mr. WYMAN. An annual inspection——

Mr. HAY. I mean an inspection which takes place without the prior knowledge of the authorities.

Mr. WYMAN. The conditions here are different. We have 21 hospitals, and of course we want an inspection of each hospital by an officer who is not connected with it.

Mr. HAY. I understand; but, as a matter of fact, you are a member of the board and know what takes place there.

Mr. WYMAN. Yes, sir.

Mr. HAY. Has this hospital been subject to inspections of the character which other hospitals have? For instance, army hospitals, navy hospitals, and the hospitals under your care?

Mr. WYMAN. Well, in a general way I believe it has. For instance, I myself have gone through the different wards and thrown back the bed-spreads and turned up the mattresses and made an inspection.

Mr. HAY. Was that on the day when the Board was there?

Mr. WYMAN. That was on my visiting day, yes; but the hospital is a very large one and nobody could tell where I might hit. As to an annual inspection by somebody out of the hospital, I would not like to say that I think it is necessary, although I would not say it would be a bad thing.

The CHAIRMAN. You spoke of the weekly inspection of the several hospitals under your care.

Mr. WYMAN. Yes, sir.

The CHAIRMAN. That is by a medical officer in charge?

Mr. WYMAN. By the medical officer in charge. It is a formal inspection.

The CHAIRMAN. Of course that is all provided for by the medical attendants at St. Elizabeth's?

Mr. WYMAN. Exactly; yes, sir. I do not think that would apply there. They could not do that at St. Elizabeth's, because our hospitals are very small institutions, in comparison with St. Elizabeth's.

The CHAIRMAN. That is all. Judge Maury, Mr. Smyser would like to ask you a question.

#### ADDITIONAL TESTIMONY OF WILLIAM A. MAURY.

WILLIAM A. MAURY, having been heretofore sworn, was examined and testified as follows:

Mr. SMYSER. Judge Maury, in the course of your service, do questions of this kind come to the Board of Visitors—for instance, where patients are wrongfully held there, patients who have recovered and who ought to be discharged?

Mr. MAURY. I think every sort of question, Judge, for the well-being at one time or another, comes before us, while I do not recall a distinct instance of that kind.

Mr. SMYSER. Of course your board have, perhaps, no authority to discharge, but only to suggest certain things, perhaps. What I want to get at is whether such complaints come to your board.

Mr. MAURY. Well, sir, I do not think I recollect any instance of that kind, although many complaints of many kinds come before us; and it would be quite natural, people not knowing that we had no power to act, for them to make application to us.

Mr. SMYSER. As a matter of fact, the board of visitors have not any power?

Mr. MAURY. Yes. Generally they resort to habeas corpus. May I make a remark in addition to that?

The CHAIRMAN. Certainly.

Mr. MAURY. The honorable member who sits there[indicating]—

The CHAIRMAN. That is Mr. Hay.

Mr. MAURY. Yes; Mr. Hay. He asked me something in reference to the expediency or advisability of a commission of lunacy. I might have said with reference to that that the medical members of the board, and perhaps the legal members—they say I am the legal member; I know a little law, but not much, but still the board is tolerant of me—that having those members, that of itself per se makes a commission of lunacy, perhaps. I just throw that out as what has occurred to me.

#### TESTIMONY OF DR. G. L. MAGRUDER.

Dr. G. L. MAGRUDER, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Dr. Magruder, we would be very glad to hear what you have to say in regard to this matter. Dr. Gunnell and Mr. Maury have both of them made statements, and if there is any desire upon your part to make any statement in addition to what they have said we will be very glad to hear it.

Dr. MAGRUDER. I am an active member of the board of visitors, and have been since 1902, but my acquaintance or experience dates back to when I was a young man, before I was a student of medicine. I have known Dr. Nichols as a young man, and then after I became a student of medicine I took some interest in the institution, because I was appointed a police surgeon in the city within eighteen months after my graduation. My duty was then to examine a majority of the people who came to Washington with notions in their heads and to commit them there. Of course it made me somewhat familiar with the institution. I served in that position for several years. I, of course, have visited there several times and at different times, and I was very favorably impressed with the management at that period. Of course the hospital administration, the hospital management, was nothing then to what it is—today.

About 1885 I became dean of the medical department of Georgetown University and became very much interested then. I was also professor of materia medica and therapeutics, and in looking out for the school I was struck very forcibly with the idea that it would be desirable to have a department on mental diseases and insanity and I came in touch with the authorities there more closely. We had a lecturer from the institution connected with the medical school.

I think I have seen the institution practically for the last thirty-odd years. I have been practicing medicine since 1870. I knew Dr. Richardson probably more intimately than any of the others, because I was thrown very close to him, and we made more advance steps in medical teaching there under his time, in the medical school, and we found him a very earnest advocate of higher teaching. I occasionally went to the institution and went through it. He encouraged teaching, because he said it had been his experience that all institutions were

better by having their men in teaching faculties, and he encouraged it.

We had clinics over there, and it was necessary for me to go there to see about the clinics, and I came in close touch with him. I frequently talked with him in regard to the construction and management of the buildings, but of course as regards the details of the institution I did not get close to it until I came on the board of visitors; but I frequently went through the wards and everything appeared to be very clean. I went into the dining room and saw the food that was prepared before I became a member of the board of visitors, because in 1902, when I became a member of the board of visitors, I was with Dr. Richardson and saw some of his work. When the Doctor died the question of his successor was submitted to several members of the board of visitors. Among the credentials were those of Dr. White, and we decided immediately when we saw the credentials submitted in regard to Dr. White that he would be the successful candidate. After Dr. White was appointed I saw a great deal of him. I had frequent conferences not only at the times of our regular meetings, but at odd times, and I have seen a continued improvement in the institution under his management.

Dr. Richardson introduced a great many of the modern improvements, but Dr. White has supplemented that and has gone way ahead of it. I have nothing but praise for the administration there at that institution to-day. I have been through every ward, I have been through the kitchen, and through the various departments. I do not know of a spot hardly in the institution that I have not been through. I have seen the food, and I have eaten the food, and have been present at an investigation when the food was so badly condemned; we had the persons who signed the paper right before us, and we had the food brought right into the room and placed on the table, and the men who had made these complaints stated that that was the same food they had eaten that day, or the day before, and the members of the board ate that food and passed upon it as perfectly satisfactory, and there was not a man that would not have been glad to have it on his table. As to the oleomargarine that so many have howled about, we have occasionally had meetings of the board of visitors when we have had lunch there, and that oleomargarine is served at the table for us. I have never tasted a mouthful of butter since I have been a member of the board of visitors.

The CHAIRMAN. There, you mean?

Dr. MAGRUDER. Yes, over there; and we do not condemn it because the color is a little different. We know the digestibility of it, and we know that if it is properly prepared it is a perfectly proper article of food. As to keeping the records of the hospital, I have never seen anything more thorough than they are there now. I have been connected with hospitals, of course, and have been a college man all my life, more or less. I think, since 1871 I have been on hospital boards, even on the active staff, or on the consulting board, or on the directory, and I have known of no institutions that have been conducted in a better manner than this institution here, as to the economical management, the welfare of patients, and the welfare of employees.

Mr. SMYER. Doctor, charges have been made of mistreatment of patients and cruelty. Do you think that could have occurred out there?

Dr. MAGRUDER. Yes, I think it could have occurred. You know we can not watch every employee, sir, and we very often get bad employees.

Mr. SMYSER. Did knowledge of such conditions come to you or to the board?

Dr. MAGRUDER. I can not recall that any was ever reported to the board, or to me individually—any instance of cruelty to any patient.

Mr. SMYSER. Did it come to you personally or to the board, as to the fact of the dismissal of employees for improper treatment of the patients?

Dr. MAGRUDER. Yes, sir; it did. It came to the board that a certain employee had been dismissed for cruelty to patients, and others have been arrested, and they endeavored to prosecute them for assault on these patients.

Mr. SMYSER. Doctor, I take it that your board has kept abreast of the times in respect to the treatment of patients in such institutions?

Dr. MAGRUDER. We have tried to.

Mr. SMYSER. You have tried to at any rate?

Dr. MAGRUDER. Yes, sir.

Mr. SMYSER. In the treatment of patients in an improper manner by employees, that is a matter that would be left with the superintendent largely?

Dr. MAGRUDER. Largely; yes, sir.

Mr. SMYSER. And the discharge or discipline would come from him?

Dr. MAGRUDER. Undoubtedly; but we would expect him to report his action to us, and we have frequently at these board meetings asked him about it and discussed those questions, and we have had very free discussions. Our discussions have not been limited to the board meetings, because the relationship between the superintendent and the board of visitors has always been exceptionally pleasant. We have talked for the benefit of that institution. We have talked over the telephone when we would hear of any of these so-called charges and have our attention brought to them. For instance, this very thing here—we saw it in the paper in the morning at 8 o'clock, and by 9 o'clock every member of the board of visitors had been communicated with and a meeting was called. To show you how promptly we do these things, I saw it at 8 o'clock in the morning. I finished my breakfast at half past 8, and called Dr. White by the telephone and had communicated with Dr. Gunnell before 9 o'clock, and a meeting was called for that day. That is the way we have done those things.

Mr. SMYSER. You feel that you have not, in any manner, as a member of the board of visitors, been derelict in your duties out there?

Dr. MAGRUDER. I do. I never assume a duty that I do not carry out to the best of my ability, and I have been in rather active life in this city for a good many years. I happen to be on three or four boards to-day, and I am at meetings constantly.

Mr. WALLACE. I would like to ask you one question. You speak of being on this board, and on other boards in the District here. Have you been on hospital boards outside of this District?

Dr. MAGRUDER. No, sir; my practice has been limited here. Occasionally some of my friends who have come here have called me out of Washington—patients whom I have treated here have called me to

their homes afterwards to treat them. I may say that my knowledge of hospitals is properly a little——

Mr. WALLACE. What do you say as to the management of St. Elizabeth's Hospital as compared with the others?

Dr. MAGRUDER. I think it will compare most favorably with any institution I have ever visited. The staff is an admirable staff, and the work they are doing is for the benefit of mankind at that institution. They are teaching the profession. We have educated men there who take charge of other institutions, and Dr. Blackburn, the pathologist, is one of the finest men in his branch I think in the world. At the time of the International Medical Congress here in Washington I was chairman of one of the principal committees, and that made me a member of the executive committee, and I remember that the section on microscopy and of pathology and allied branches was held in the medical department of the Georgetown University because we had a laboratory there and microscopes. The chairman of the committee asked me about some work and he spoke of some brain work, some brain sections. He said he had read of and had seen some of the work of Dr. Blackburn, and could I get Dr. Blackburn to help him at the time. Dr. Blackburn was one of the most modest men I have ever seen in my life, a retiring man, and Dr. Blackburn refused at first to go to that section. I prevailed upon him and insisted that he should go, and he did. I introduced him to the chairman, and after the meeting was over he said: "Dr. Magruder, I must thank you for introducing me to Dr. Blackburn. The work he brought before us was the most superb work I have ever seen, and for him to have backed out, as he was trying to do, would have been a shame. He gave us valuable work."

We have work now that he has brought forward that would be of benefit to the world if we could publish it. Dr. White and I have tried to have the plates—a few plates, about 100—published for the purpose of distributing them to medical institutions of the world, and it would redound to the credit of that institution and contribute a good deal to learning. We have not been able as yet to do it on account of the investigation in the line of economy in the printing committee—the investigation as regards the cost of things. We hope to get it printed next year.

#### TESTIMONY OF GEORGE W. EVANS.

GEORGE W. EVANS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your position in the Government service?

Mr. EVANS. I am chief of the division of finance and disbursement. I am the disbursing officer of the Department of the Interior.

The CHAIRMAN. Do you have anything to do with the finances of the Government Hospital for the Insane?

Mr. EVANS. I disbursed all the moneys for the construction of the additional buildings over there, and I also disbursed the moneys of the hospital proper during the interim between the appointment of Dr. White and the death of Dr. Richardson, and I have the examination of the accounts—that is, the administrative examination of accounts—of Dr. White at present.

The CHAIRMAN. How often are his accounts examined?



Mr. EVANS. Quarterly. They are rendered quarterly and receive the administrative examination under the Dockery law within ten days after they are submitted.

The CHAIRMAN. What do you think of the system of disbursing the funds of St. Elizabeth's Hospital at present?

Mr. EVANS. I do not know as I would care to comment on that, other than to refer you to the reports of the Secretary for the last four years on that point, in which he has recommended that in the interest of the public service the superintendent should be relieved of the responsibility of the disbursement of the funds of the hospital, and that the disbursements, like the disbursements of all the other branches and bureaus of the Interior Department, should be centralized in the one disbursing office of the Department, subject to the approval of the Secretary of the Interior. That has been the recommendation the Secretary has made to Congress for the last four years, and he has embraced it in his present report, and it is now, I believe, a recommendation in the sundry civil bill of the current year. So far as the disbursement of the funds that have been made by the superintendent of the Government Hospital for the Insane are concerned they have been all rendered in a perfectly satisfactory manner.

The CHAIRMAN. And properly disbursed?

Mr. EVANS. And properly disbursed.

The CHAIRMAN. The only question with you is as to whether the entire system should be changed?

Mr. EVANS. The question with the Secretary of the Interior is, whether the one officer should be the purchasing officer and the disbursing officer and ordering officer—in fact, the whole thing in one—whether that is good administration, or whether it should be segregated, for two reasons: To relieve the superintendent of that additional responsibility and also to have the thing centralized, as all the other bureaus, including the Freedmen's Hospital and others, are now, under the Department. Of course that is a question with the Secretary. As far as I am personally concerned, I may say, as an interested party, that I would not care about having it done, because I do not want the additional responsibility. But still, if it be done, I would have to assume the responsibility; I would have to take it.

The CHAIRMAN. Do you know when the Department of the Interior was first created?

Mr. EVANS. The Department of the Interior was created in 1849.

The CHAIRMAN. That was before the creation of St. Elizabeth's?

Mr. EVANS. Ten or eleven years before.

The CHAIRMAN. Six years before. St. Elizabeth's was created in 1855 and the Interior Department in 1849.

Mr. EVANS. Yes, six years.

Mr. HAY. What has been the experience of the Department as to the advisability of segregating the responsibilities and in putting into the hands of any one man, as you said a moment ago, of disbursing, purchasing, and ordering? What has been the experience of the Department as far as you know?

Mr. EVANS. Well, I do not know as we have had a parallel case. This is the only case, as far as my memory serves me. As I stated before, the Department, or rather the Secretary of the Interior, has at considerable length referred to that in his reports. The Comptroller of the Treasury in his last annual report also touched upon the same

subject—not in regard to this hospital particularly, but in regard to a combination of duties in one officer, that it should be segregated.

The CHAIRMAN. In doing anything of that kind would your idea be to send a disbursing officer over to the hospital and put him in charge there? Those disbursements have to be constantly made, almost daily, do they not? Would it not interfere with the easy conduct of the hospital?

Mr. EVANS. I do not know what would be the method adopted by the Secretary of the Interior, but following out the regular method and custom of the Department now, it would be to make disbursements direct from the Department of the Interior—to go over there as disbursing officer and make these payments on the salary payments twice a month, on the fifteenth and at the end of every month; and on the vouchers on their presentation to the Department by the persons who furnished the supplies. Those payments could be made immediately upon presentation of the vouchers, and there would be no delay. I am only stating the method now, you understand.

The CHAIRMAN. Is that method pursued in the other bureaus of the Department?

Mr. EVANS. Yes, in all the others.

The CHAIRMAN. In the Indian Bureau?

Mr. EVANS. Yes, sir; in all the bureaus, including the Freedmen's Hospital.

Mr. HAY. The Freedmen's Hospital comes under you?

Mr. EVANS. Yes; the Freedmen's Hospital, and the Architect, or rather the Superintendent of the Capitol. All of the appropriations made for the Superintendent of the Capitol are made through that office.

Mr. HAY. So you would send a man over there to pay the employees.

Mr. EVANS. A disbursing officer.

Mr. HAY. You would require the employees to go to the Interior Department?

Mr. EVANS. No; he would go there, as he does to the other—to the Patent Office, to the Land Office, to the Indian Bureau, and all the other bureaus of the Department. He goes to those different bureaus on pay day and pays them off.

The CHAIRMAN. The statute says: "The superintendent shall be the responsible disbursing agent of the institution."

Mr. EVANS. That is true.

The CHAIRMAN. So that law would have to be changed?

Mr. EVANS. A change of that statute has been recommended.

The CHAIRMAN. That is not on account of any criticism as to the disbursement of the funds?

Mr. EVANS. Not at all.

The CHAIRMAN. But on general principles?

Mr. EVANS. On general principles, and in accordance with views already expressed by the Comptroller of the Treasury to the effect that the thing should be separated, that the head of the Department should have the disbursement of the funds of every bureau and office of the Department under his immediate supervision there in his own Department. That is the way it was done in regard to the construction of the new buildings, which amounted to one million and a half dollars, or thirteen hundred thousand dollars. That is the way it was done with that. During the three months when there was a

vacancy in the office there the Comptroller of the Treasury directed me, on the recommendation of the Secretary of the Treasury, to assume the disbursements of the institution, which I did without any trouble, embarrassment, or difficulty whatever.

Mr. HAY. Do you see, or can you conceive, how the change indicated by you would in any way embarrass the superintendent of the hospital?

Mr. EVANS. No, sir; I do not see how it could embarrass the superintendent of the hospital. On the contrary, I should think it would relieve the superintendent of the hospital of a good deal of financial responsibility, loaded down as he is with other matters. I should think it would materially help him.

The CHAIRMAN. The superintendent of the hospital gives bond, does he not, for the performance of his duty?

Mr. EVANS. Oh, yes, sir. I want to say that he has always rendered good, true and accurate accounts, and there has been no criticism whatever on the part of the Department as to any accounts that he has rendered.

#### TESTIMONY OF WILLIAM H. UNSWORTH.

WILLIAM H. UNSWORTH, having been duly sworn, was examined, and testified as follows:

Mr. SMYSER. What is your name?

Mr. UNSWORTH. William H. Unsworth.

Mr. SMYSER. Where do you live?

Mr. UNSWORTH. At Mount Ranier, Md.

Mr. SMYSER. Were you ever connected with the hospital?

Mr. UNSWORTH. No, sir. I worked out there, though.

Mr. SMYSER. When?

Mr. UNSWORTH. Winter before last.

Mr. SMYSER. What at?

Mr. UNSWORTH. I worked for the National Automatic Fire Alarm Company out there.

Mr. SMYSER. How long did you work there?

Mr. UNSWORTH. I was working there about one month that winter. I worked in the relief building. That is the only building I worked in.

Mr. SMYSER. Did you do good or bad work?

Mr. UNSWORTH. Well, I must do good work or I wouldn't be able to hold the position I am at now.

Mr. SMYSER. When did you say you worked out there?

Mr. UNSWORTH. Winter before last.

Mr. SMYSER. Do you know anything about the treatment of patients there?

Mr. UNSWORTH. That is about the only thing I do know anything about.

Mr. SMYSER. Outside of your work, of course?

Mr. UNSWORTH. I mean over there.

Mr. SMYSER. What did you see there by way of treatment of patients?

Mr. UNSWORTH. I seen several things there, especially when they would take a bath. There was two old fellows there who looked as if to be brothers. They would haul them down to the bathroom, and

they didn't want to take a bath, and they threw them on the floor, and they would strike them that way [indicating], and illtreat them.

Mr. SMYSER. Hold on. Let us see what they did. You say they would haul them down to the bathroom. How did they get them down? In chairs?

Mr. UNSWORTH. No, they would carry them down. Two or three of them would pull them down.

Mr. SMYSER. Did they pull them, or drag them?

Mr. UNSWORTH. Oh, they didn't drag them over the floor. They held them on their feet.

Mr. SMYSER. They would get them down there and strip them

Mr. UNSWORTH. Yes, and then put them in the bath tub.

Mr. SMYSER. Then what?

Mr. UNSWORTH. Then they washed them and took them out, and then they were all right.

Mr. SMYSER. Then what? What is wrong about that? These men did not want to bathe, did they?

Mr. UNSWORTH. No—well, it was just the manner of the treatment that they done, to get them down that way.

Mr. SMYSER. What did they do?

Mr. UNSWORTH. I just told you. They would throw them down, and the men would holler and plead to let them alone. They seem to have done it for amusement, and other fellows have done it for amusement. They ill-treated the patients there.

Mr. SMYSER. Who were these attendants who did that?

Mr. UNSWORTH. I don't know them, but I could point them out if I seen them.

Mr. SMYSER. What else?

Mr. UNSWORTH. Well, there was another little fellow over there whom they seemed to take pleasure in to start him into fighting, and after they got him excited and got him fighting at himself they would walk off and stand looking at him fighting himself in the middle of the floor.

Mr. HAY. What ward was that in?

Mr. UNSWORTH. That was Relief 2, I think. I am not positive. It was in the relief building.

Mr. SMYSER. How would they get him started to fighting himself?

Mr. UNSWORTH. They would go to slapping or pulling their hands around his neck [illustrating] and turn him upside down or any way to get him started, and then walk off and leave him. He couldn't see them after that and he got to fighting with himself.

Mr. SMYSER. You say he couldn't see them? Why? Was he blind?

Mr. UNSWORTH. Well, I don't know whether he could see them or not. He didn't look as if he could see them the way he was fighting on the floor, rolling and twisting up and down.

Mr. HAY. What was his name?

Mr. UNSWORTH. I couldn't tell you his name.

Mr. SMYSER. Who made him fight?

Mr. UNSWORTH. The attendants.

Mr. SMYSER. They were teasing him? Is that it?

Mr. UNSWORTH. Teasing him; yes, sir. They would get him started and excited, and then they would walk off and look at him and laugh.

Mr. SMYSER. Did they ever hurt him?

Mr. UNSWORTH. No, sir.

Mr. SMYSER. Well, get to some who were hurt.

Mr. UNSWORTH. Well, on one occasion there was a fellow who was taking a bath. There was a patient that didn't like the attendant, and this patient was to put on pants, and he wouldn't do it unless this attendant walked away from him. He seemed to be a nice sort of a fellow, too, this patient was, but he didn't like the attendant, and the attendant wouldn't go away from him. He said: "If you will just leave me alone I will put my pants on and it will be all over;" but he wouldn't do it. After a while the attendant jumps on him and throws him down and jumps on his ribs hard enough to break him to pieces. Some man came down—I think he was the doctor of that ward or building, a stout fellow—and he approved of it. Finally, they got him to put on his pants. But I don't know whether he was the doctor.

Mr. SMYSER. Who was that attendant?

Mr. UNSWORTH. He was a tall slender fellow. I don't know his name, but I could point him out.

Mr. SMYSER. Who was the doctor who approved of it?

Mr. UNSWORTH. I don't know his name either.

Mr. SMYSER. Did you ever try to find out?

Mr. UNSWORTH. No, sir.

Mr. SMYSER. Well, will you, if I pay you this \$4 that you were going to lose if you had not been sworn as a witness—will you go there and try to find out? I want these names.

Mr. UNSWORTH. How could I find out?

Mr. SMYSER. Would you not know these men if you saw them?

Mr. UNSWORTH. I would know them; yes, sir.

Mr. SMYSER. Won't you do that?

Mr. UNSWORTH. If you can tell me some way I can find out I will do it, but who is going to tell me.

Mr. SMYSER. I can not tell you if you do not know the men when you see them.

Mr. UNSWORTH. I didn't say I wouldn't know them if I saw them. I do know them if I see them.

Mr. SMYSER. Did he hurt the fellow who wouldn't put his pants on?

Mr. UNSWORTH. If he jumped on me I think it would hurt me pretty bad.

Mr. SMYSER. I mean from what you could see.

Mr. UNSWORTH. Certainly it hurt him.

Mr. SMYSER. Did he scream?

Mr. UNSWORTH. No, he didn't scream, but he groaned and grunted and all like that, like any other man would that was down.

Mr. SMYSER. And the doctor approved of that?

Mr. UNSWORTH. That is, he said he ought to be treated that way; that some of these fellows around here are so bull-headed that they won't do nothing. That is what he said.

The CHAIRMAN. You say the doctor said that?

Mr. UNSWORTH. I don't know whether he was a doctor, but he seemed to be the head one of that ward. In fact, he issued the medicine.

The CHAIRMAN. Did you ever tell anybody about this who was connected with the hospital?

Mr. UNSWORTH. No, sir.

Mr. SMYSER. Why didn't you?

Mr. UNSWORTH. Simply because I was instructed not to say anything about what went on in the hospital.

The CHAIRMAN. Who instructed you?

Mr. UNSWORTH. The man I was working for.

The CHAIRMAN. Did you ever tell him about it?

Mr. UNSWORTH. No, sir.

The CHAIRMAN. When did you first talk to anybody about this occurrence?

Mr. UNSWORTH. Nothing at all, only among the fellows. I said how they treated them there, and I didn't know anything would come of it, and the next thing I knew I was summoned.

The CHAIRMAN. Did anybody call on you and talk with you before you came here?

Mr. UNSWORTH. Nobody called on me. I was summoned. That is, they came out to see if I would come down. Some man came up on the building one day.

The CHAIRMAN. Who was it?

Mr. UNSWORTH. I don't know his name.

The CHAIRMAN. Would you know him if you saw him?

Mr. UNSWORTH. Yes, sir.

The CHAIRMAN. What did he say?

Mr. UNSWORTH. He asked me, he said he was looking me up as a witness, and if I was summoned would I go down, and I knew of these things and I knew this inquiry was going on, and I thought probably it should be known, and I told him I would come down, and that was all that there was said.

The CHAIRMAN. You talked to him in regard to the occurrence you have come here and told about, did you not?

Mr. UNSWORTH. I said I knew something about it, and that is all I said to him.

Mr. HAY. And you do not know how he got your name?

Mr. UNSWORTH. No, sir; I don't know myself, without it was that I was talking to some of these fellows.

Mr. HAY. What fellows?

Mr. UNSWORTH. The workmen around, what I worked with.

Mr. SMYSER. Did they see the same things you saw?

Mr. UNSWORTH. The workmen over there? Yes, sir; but not the men I had been talking to afterwards. There was four of us that day that saw this.

Mr. SMYSER. Who were they?

Mr. UNSWORTH. I never did learn their names. I was only with them a month or so, but Mr. Frost could tell you.

Mr. SMYSER. Who?

Mr. UNSWORTH. Mr. Frost. He could tell you the names of them—no, he couldn't tell you their names either, but there was three of them saw this attendant jump on the patient.

Mr. HAY. Is there anybody here who came to see you about this investigation? I mean anybody in this room now?

Mr. UNSWORTH. That gentleman there—he brought the summons.

Mr. HAY. I know, but I mean the man who came and asked you whether you would come here or not.

Mr. UNSWORTH. No, I don't see any one.

Mr. HAY. You do not see him here?

Mr. UNSWORTH. No, sir.

The CHAIRMAN. How long ago was this when somebody came and asked you whether you would come here or not?

Mr. UNSWORTH. I guess it has been about a month ago now—a month or three weeks, or something like that.

Mr. SMYSER. Do you know the name of the man who came to see you?

Mr. UNSWORTH. No, sir; I didn't ask his name. I don't know who it was.

Mr. SMYSER. Was it this gentleman [indicating] or was there another man who came to see you?

Mr. UNSWORTH. No, he is the one who came and brought the summons yesterday evening.

Mr. SMYSER. When was the other man there to see you?

Mr. UNSWORTH. About a month or three weeks ago.

Mr. SMYSER. What kind of a looking man was he?

Mr. UNSWORTH. He had a sort of gray mustach, and he was a stout fellow, with a right full face.

Mr. SMYSER. About how old a man was he?

Mr. UNSWORTH. I don't know. I guess he was about 50 years old.

#### TESTIMONY OF CHARLES POE.

CHARLES POE, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Poe, you are a practicing lawyer here in the city of Washington?

Mr. POE. I am; yes, sir.

The CHAIRMAN. How long have you lived here and practiced law here, at least?

Mr. POE. I have been in Washington since 1897. I have been practicing law for thirty years.

The CHAIRMAN. Have you ever had occasion to have any professional business in connection with St. Elizabeth's Hospital?

Mr. POE. Yes; last August I had some cases. I was consulted by a man named Reade, who came to see me on behalf of a man named O'Keefe. Mr. Reade was what is called a trusty at the hospital, and he told me Mr. O'Keefe was there illegally confined. I looked into the question and gave an opinion that he was, as most of the people were, in my judgment—these soldiers. They had originally been committed for an indefinite time, and most of them had been enlisted for a definite time.

The CHAIRMAN. You say you gave an opinion to the effect that you thought most of them were illegally confined?

Mr. POE. Yes; and it was so determined afterwards, upon argument which I made to the court, that most of them were illegally held.

The CHAIRMAN. What case was that?

Mr. POE. This was the O'Keefe case. There were four or five cases so held by our courts here.

The CHAIRMAN. What happened to the men? Were they released?

Mr. POE. The court took this view, that possibly they might be still insane, although illegally confined, and that it would upon petition grant a writ of habeas corpus, but would permit the Government a rea-

sonable time within which to file an application for a jury de lunatico inquirendo, and then they were to be legally committed if they should be ascertained to be insane in fact.

The CHAIRMAN. Do you know what the law is relative to the commitment of soldiers who live in Homes?

Mr. POE. I thought I did, sir.

The CHAIRMAN. I am trying to get at in what way they were illegally confined. The statute says, practically, that the superintendents of all Soldiers' Homes can certify, or the chairman of the general board can certify, that a certain soldier in one of these Homes is non compos mentis and then he is sent to St. Elizabeth's and the superintendent of St. Elizabeth's is bound to receive him. Was there ever an instance that you know of where a soldier was sent in some other way than that?

Mr. POE. Yes; most of them were sent in another way.

The CHAIRMEN. How is that?

Mr. POE. Most of them were sent by an order of the War Department.

Mr. SMYSER. Is not that provided for in the statute?

Mr. POE. My contention, as a lawyer, was that the status of the soldier only existed as long as the term of his enlistment, and that as soon as the term of enlistment ceased he ceased to be a soldier.

Mr. HAY. And the court held that the statute was unconstitutional?

Mr. POE. Absolutely; and the court said that the jurisdiction of the War Department having ceased these people were entitled to a jury trial before they could be deprived of their liberty.

The CHAIRMAN. So that, in your opinion, they were properly put there, but ought to be discharged by reason of the expiration of their term of enlistment?

Mr. POE. That was one point. I did not concede that, in the first instance, they were properly put there—the way they were committed. I thought it exceedingly doubtful whether, under the Constitution, a regulation of that kind, to deprive a soldier of his liberty without a court-martial, was unconstitutional, and I so argued. The court was rather too small to go into the question of the constitutionality, when the discharge of the men could be obtained on other grounds. But I went over there, and I sent my card in to Dr. White. I did not want to apply for a writ of habeas corpus in the case without extending to him every courtesy. I was told he was not in his office, and I went over to see Mr. O'Keefe, and the doctor who was there in charge, Dr. Hummer, was very insolent to me. He said, in the first place, that I could not see the patient. I had prepared a petition for a writ of habeas corpus, and he then said that the patient could not sign the petition for a writ of habeas corpus.

I told him I thought he was a little ignorant on that subject and then he said he would have to take the patient over to see Dr. White. We went over to the administration building and saw Dr. White. This patient had been there for two or three years, and that was the first time that Dr. White had ever seen him or heard of his case. He sent for the history of his case and examined that from the records, and I then said I was going to apply for the writ and wanted the man to sign the petition. Dr. White declined to allow the man to sign the petition for the writ of habeas corpus. I said: "Doctor, I think you



had better read the history of England, and also the Code of the District." He said that he would prefer to communicate with the district attorney. I said: "You had better do it by telephone, because it is a pretty serious thing to refuse to allow a man to sign a petition for a writ of habeas corpus." He called up the district attorney's office, and then he said: "Yes, O'Keefe may sign this petition," and he allowed him to sign it, and the writ was sued out. The question came up as I have said, before Judge Stafford, and he decided that the man was illegally held. A proceeding was then instituted within a few days and we had a jury trial. At that trial there was a disagreement of the jury on the question of fact, and in a few days afterwards another jury was impaneled and the man was acquitted.

Mr. HAY. You mean that he was declared to be sane?

Mr. POE. He was declared to be sane by the jury. I went over with him then to the hospital. That is, he went over in one carriage and Dr. Hummer and I went over in another, and Dr. Hummer said "Well, as he is no longer a patient he can not get anything to eat here." "Well," I said, "I think you had better give him something to eat. He is a United States soldier." He said "No, we will give him his luncheon out of charity." "Well," I said, "I expect that will be about the same thing to him." Dr. White was not there. There was about \$80 or \$90 coming to the man, and a portion of that was my fee of course. I charged him \$50 I think. That was the understanding. Dr. White was not there, but Dr. Stack was in charge. They said they could not pay the man his money until Dr. White came back. He was in New York. I said "You will allow him to stay here to-night, will you not?" They said they would not, that I was responsible for this man's discharge and I was morally responsible for the fact that he was free, and that if anything happened to him it would be my fault. I said "Well, I will leave him here. I have no place for him at my house. If you turn him out I suppose this will not be the end of it." So, in fact, they kept him there. Then I went over there again.

Mr. BARCHFELD. What became of the man O'Keefe?

Mr. POE. Afterwards he went abroad. I will tell you ultimately what happened to him exactly. He was an Irishman, of course, and not a Quaker. He afterwards went abroad. Dr. White or Dr. Stack—I am not sure which—refused to enter on the book of the hospital that this man was found to be not insane by a jury, and Dr. Hummer said that the only thing they would give the man when they discharged him was his razor—this man who, on their theory, was crazy. I reported to Chief Justice Clabaugh the fact that the authorities there declined to put on the record the fact that this man was not insane, and Judge Clabaugh told me that I had better notify Dr. White that the orders of the supreme court were a little superior to the orders of the superintendent of the Government Hospital for the Insane. When Dr. White came back I did so report to him, and what entry was made I do not know.

The CHAIRMAN. Did you serve a copy of the order on Dr. White?

Mr. POE. Certainly. Dr. White was present in court—he or his subalterns—when the verdict of the jury was rendered. I do not know whether a certified copy of it was served or not, but he was present there, he or Dr. Stack, who was in charge at this time. There was an actual trial, which lasted a day. Dr. White then gave a check to

the order of O'Keefe, and I said that O'Keefe wanted to go back to the old country, and I asked them if they would not try to see to his transportation. They said they had nothing to do with his transportation, that they had no fund for that, and again said that I was morally responsible for his being at liberty, and I had to take him to the District building and get half of his transportation there for him, and I paid the other half as far as New York, myself. He then went abroad, and I have received letters from him since. I think the hospital out there had an idea that I was in some way interested in what is known as the Medico-Legal Society, or whatever it was, for the release of these prisoners. I had no connection with them at all. This O'Keefe matter came to me by a man named Reade, who was a prisoner out there, coming in. I had three other cases. One was that of a man named McKnight, who has been before you gentlemen. I sued out a writ of habeas corpus for him and made affidavit to that myself, because I was informed by him that although he was a trusty before he came to town on the 1st of September, he was locked up, because they imagined that he had come to my office. That is what he told me.

I filed the petition for a writ, and the writ was issued, returnable two days afterwards. For some reason it was postponed until the following day, and he escaped, I do not know how, before his trial came up on the merits, anyhow. Then there was another man named Crane and Dr. White was not present when I went out on the 4th of September, which was Labor Day. I went out with my friend, Mr. Putman. We rode out there and walked back. We got there about 2 o'clock in the afternoon, and I met Dr. Hummer right in front of his section there and told him that I wanted to see Mr. Crane and Mr. Reade. He said: "This is a hell of a time to come out here," and I told him that I did not understand such language as that, and that I had always been courteous to him and would not permit it. He said I could not see these people. I said: "Well, I will see them." He said he was not in charge, and Dr. White was away, but he would communicate with Dr. Stack, and I said all right. He communicated with Dr. Stack, and I said that I wanted, at the same time, to demand of Dr. Stack the cause of the detention of these people as well as an interview with them. That was provided for in all habeas corpus laws, especially in ours. There is a fine of \$500 for refusal to give a copy of the cause of commitment within six hours after demand—\$500 an hour, I believe.

Dr. Stack refused to talk with me over the telephone even. These two alleged insane people were brought before me and I was refused the privilege of an interview with them out of the presence of anybody else; but they signed their petitions at that time and I went to my office. My typewriter had gone and I wrote a formal demand for the copy of the cause of their detention and sent it out by a messenger boy, with instructions to wait until he got it, and I got it that night about 9 o'clock. Dr. Stack had recanted, and I got the copy of the cause of detention in this case.

MR. HAY. What became of those two cases?

MR. POE. In the case of Reade I ascertained that Reade was a man who ought not to be set at large. Dr. Hummer came to me and told me that he was a man who had homicidal tendencies, and I immediately dropped his case. I had a conversation with him, though, in the court room, and he himself said it was true that he was dangerous, so I did not press his case and he went back.

The CHAIRMAN. Who retained you in the Reade case?

Mr. POE. Mr. Reade himself. He was the first person who came to see me.

Mr. BARCHFELD. How much did Reade have coming to him?

Mr. POE. I do not know whether he had anything, but Mr. Crane agreed to pay Reade's fee. Mr. Crane had \$300 coming to him, and O'Keefe, I think, had \$85 or \$95.

Mr. HAY. What became of the Crane case?

Mr. POE. Crane's case was tried and the jury found that he was insane; but it was agreed at the time that it was a slight case, the result of a sunstroke that he had received in Cuba, and that under treatment there if he stayed six months longer he would entirely recover. I do not know what has become of him. Probably he has been discharged. Dr. White can state as to that. His was a case in which he had a delusion that his companions who had been in the same company with him had come over here and were pursuing him. He had a sunstroke in Cuba.

The CHAIRMAN. I think that is all, Mr. Poe.

The committee (at 12.10 o'clock p. m.) took a recess until 2 o'clock p. m.

#### AFTER RECESS.

The committee reassembled at the expiration of the recess, Mr. Smyser in the chair.

#### TESTIMONY OF CLARENCE PENDLETON.

CLARENCE PENDLETON, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. PENDLETON. Clarence Pendleton.

The ACTING CHAIRMAN. Are you connected with the hospital?

Mr. PENDLETON. I was.

The ACTING CHAIRMAN. When?

Mr. PENDLETON. I was discharged last October.

The ACTING CHAIRMAN. What were you discharged for?

Mr. PENDLETON. For not running the wheelbarrow. I filed an application for an attendant, and last year when they got \$30,000 behind they claimed they wanted each attendant to take turns running the wheelbarrow and sweeping the streets.

The ACTING CHAIRMAN. And you refused to do your share?

Mr. PENDLETON. I refused to do my share, as I did not file my application for a street sweeper.

The ACTING CHAIRMAN. And you were discharged?

Mr. PENDLETON. Yes, sir; I was discharged by Supervisor Burch. He is the man who said I was discharged. Dr. White was not there at the time. He was in New York.

The ACTING CHAIRMAN. You went off the pay roll, I take it?

Mr. PENDLETON. How is that?

The ACTING CHAIRMAN. You got off of the pay roll?

Mr. PENDLETON. Yes, sir; that is correct.

The ACTING CHAIRMAN. How long were you there as an attendant?

Mr. PENDLETON. I think I was there—I am quite sure I was—seventeen months.

The ACTING CHAIRMAN. What ward were you on?

Mr. PENDLETON. I was on every ward on the West Side. It was under Dr. Stack.

The ACTING CHAIRMAN. Did you know anything about the treatment of patients?

Mr. PENDLETON. Well, I have seen patients mistreated when I thought it was uncalled for.

The ACTING CHAIRMAN. By whom?

Mr. PENDLETON. Well, I saw one patient mistreated by Lloyd.

The ACTING CHAIRMAN. By whom?

Mr. PENDLETON. Mr. Lloyd.

The ACTING CHAIRMAN. Who was the patient?

Mr. PENDLETON. The patient was a dago named Gererius.

The ACTING CHAIRMAN. What was the treatment he employed?

Mr. PENDLETON. The patient went in his room, and the attendant had some medicine to give him, and he wouldn't come out. Mr. Lloyd brought him to the door and struck him.

The ACTING CHAIRMAN. What with?

Mr. PENDLETON. With his fist.

The ACTING CHAIRMAN. Where?

Mr. PENDLETON. Right in the forehead, and knocked him down and cut his head about that long [indicating]. He knocked him senseless. I was standing in the dining room door at the time.

The ACTING CHAIRMAN. How far away were you?

Mr. PENDLETON. I was about as far away as from here to the window, may be a little bit farther.

The ACTING CHAIRMAN. Did you go to his relief?

Mr. PENDLETON. I went down there to see what the trouble was. Mr. Lloyd said he had struck the patient. I wanted to know what for, and he said he wouldn't take his medicine. He said he bet he would take his medicine next time he wanted him to take it.

The ACTING CHAIRMAN. Did you report it?

Mr. PENDLETON. It was not my business to report it.

The ACTING CHAIRMAN. That is not what I asked you. Did you report it?

Mr. PENDLETON. No, sir.

The ACTING CHAIRMAN. Why did you not?

Mr. PENDLETON. The reason I didn't report it, if I had reported it there would not have been an attendant in the hospital that would have spoken to me.

The ACTING CHAIRMAN. Have they got a close organization over there that taboos a man who reports an attendant for cruelty?

Mr. PENDLETON. Well, it looks so.

The ACTING CHAIRMAN. Is that the only reason you had for not reporting it?

Mr. PENDLETON. That is the only reason.

The ACTING CHAIRMAN. By what rule of morality or ethics do you govern yourself—govern yourself as to your duties?

Mr. PENDLETON. That is the way I governed myself at that time. I had not been there very long when that occurred and I didn't know what to do. I didn't think it was my business to report it.

The ACTING CHAIRMAN. Who else saw this besides yourself?

Mr. PENDLETON. Mr. Lloyd was on the ward, that hit the patient, and a fellow named Fred Hawkins and Tom Moffatt.

The ACTING CHAIRMAN. Did Hawkins see it?

Mr. PENDLETON. I suppose so. When I opened the dining-room door after I saw the patient fall I went down and Hawkins and Lloyd and Moffatt were standing over the patient and they took him in and put him on a bed and he came to in a minute or two.

The ACTING CHAIRMAN. Did you see him struck?

Mr. PENDLETON. I saw him hit, but I didn't see where he hit him. I asked him where he hit him, and he said on the forehead.

The ACTING CHAIRMAN. Did you see him strike the blow?

Mr. PENDLETON. No, I didn't. I saw him and the patient tussling, but I didn't see him hit him. It was done pretty quick.

The ACTING CHAIRMAN. He said he had struck him?

Mr. PENDLETON. He said he had struck him. He said "By God, he bet he would take the next medicine he offered him." That is what he said.

The ACTING CHAIRMAN. Did you make any other inquiry about it?

Mr. PENDLETON. No, sir; I did not.

The ACTING CHAIRMAN. What other patient did you see illtreated there?

Mr. PENDLETON. I saw a patient wrung out by the towel once, that I thought was uncalled for.

The ACTING CHAIRMAN. Who was the patient?

Mr. PENDLETON. I don't know the patient.

The ACTING CHAIRMAN. Who was the attendant?

Mr. PENDLETON. He was a fellow named Otis Wilson. I hadn't been there but about ten days.

The ACTING CHAIRMAN. What ward was it on?

Mr. PENDLETON. White Ash, right above Gray Ash.

The ACTING CHAIRMAN. He was wrung out by a towel?

Mr. PENDLETON. Wrung out by a towel, one morning when they were shaving.

The ACTING CHAIRMAN. They put it around his neck and twisted it?

Mr. PENDLETON. Yes, sir; twisted it.

The ACTING CHAIRMAN. How close were you?

Mr. PENDLETON. I was right by the side of him.

The ACTING CHAIRMAN. What was the effect of the towel wringing?

Mr. PENDLETON. Well, he looked to be pretty well choked.

The ACTING CHAIRMAN. Well, was he choked?

Mr. PENDLETON. Sure, he was choked. Put a towel round your neck and wring it pretty hard and you would think you were choked; I would think so.

The ACTING CHAIRMAN. What were you doing while this was going on?

Mr. PENDLETON. I was standing right by the side. I wasn't doing anything. I was a new attendant; I had only been there about ten days.

The ACTING CHAIRMAN. I do not care about your being a new attendant. Did you say anything?

Mr. PENDLETON. No, sir.

The ACTING CHAIRMAN. Why didn't you?

Mr. PENDLETON. Because I didn't know what to say. I thought probably that was the way they did business there.

The ACTING CHAIRMAN. Did you ask anybody if that was the way they did business?

Mr. PENDLETON. No, sir; I had nothing to say at all.

The ACTING CHAIRMAN. You just let it go at that?

Mr. PENDLETON. Sure.

The ACTING CHAIRMAN. What effect did it have on the patient?

Mr. PENDLETON. All the effect I could see was that the patient was choked, and badly choked. His face turned red, and you could see the impression of the towel around his neck.

The ACTING CHAIRMAN. What had the patient been doing?

Mr. PENDLETON. He was shaving him, and the patient was a little bit unruly.

The ACTING CHAIRMAN. How was he unruly?

Mr. PENDLETON. He didn't want to be shaved.

The ACTING CHAIRMAN. What did he do?

Mr. PENDLETON. He fought at the barber.

The ACTING CHAIRMAN. How did he fight?

Mr. PENDLETON. He held the razor up, he held his arms off, when he went to shave him.

The ACTING CHAIRMAN. What did the barber say?

Mr. PENDLETON. The barber did not say much, but Wilson said, "I will make him stand still," and he put a towel around his neck while he was sitting in the chair like this [indicating] and wrung him.

The ACTING CHAIRMAN. What was the barber's name?

Mr. PENDLETON. Lauer.

The ACTING CHAIRMAN. Is he there yet?

Mr. PENDLETON. No, sir.

The ACTING CHAIRMAN. Where is he?

Mr. PENDLETON. I think he is in Washington, if I am not mistaken.

The ACTING CHAIRMAN. He is a barber, is he?

Mr. PENDLETON. I don't know what kind of a trade he is following now. He was a barber at the hospital.

The ACTING CHAIRMAN. Did anybody else see this besides yourself?

Mr. PENDLETON. I think not.

The ACTING CHAIRMAN. What else did you ever see over there?

Mr. PENDLETON. That wringing out was a common occurrence every day. I wouldn't dare to mention the ones I have seen wringing them out.

The ACTING CHAIRMAN. How is that?

Mr. PENDLETON. I say I wouldn't think of calling the names of the ones I have seen wringing them out.

The ACTING CHAIRMAN. Was it regular treatment?

Mr. PENDLETON. It looks so.

The ACTING CHAIRMAN. Well, you say it looks so. We were not there. We could not see it, and you were there.

Mr. PENDLETON. It appeared to me that it was treatment of that kind.

The ACTING CHAIRMAN. Did you ever see any other patients towelled?

Mr. PENDLETON. I have.

The ACTING CHAIRMAN. Could you tell who they were?

Mr. PENDLETON. I could not tell who they were.

The ACTING CHAIRMAN. Could you tell who the attendant was?

Mr. PENDLETON. No, sir, I could not; because it was such an everyday occurrence that I never paid any attention to it. But that made more impression on me because I was a new man in the institution and had never seen any of that before.

The ACTING CHAIRMAN. Did you ever towel any?

Mr. PENDLETON. No, sir; I never did.

The ACTING CHAIRMAN. Did you ever strike any?

Mr. PENDLETON. I have.

The ACTING CHAIRMAN. What for?

Mr. PENDLETON. Self-defense.

The ACTING CHAIRMAN. Was it necessary?

Mr. PENDLETON. I thought it was necessary, sir.

The ACTING CHAIRMAN. Could you have gotten along without it?

Mr. PENDLETON. I might have got along without it, but I might have gotten hurt from the patient. He was coming on me pretty wild and I struck him and I broke two knuckles there [indicating]. I have them to show for it.

The ACTING CHAIRMAN. So it does happen over there sometimes that an attendant must defend himself, does it?

Mr. PENDLETON. Yes, sir.

The ACTING CHAIRMAN. You did, and it broke your knuckles?

Mr. PENDLETON. I certainly did.

The ACTING CHAIRMAN. In the art of self-defense?

Mr. PENDLETON. And I had blood poisoning in that hand [indicating] at the time, and I hadn't but one hand to protect myself with and I was going to protect myself.

The ACTING CHAIRMAN. Was any of this toweling or anything else done for the purpose of commanding obedience?

Mr. PENDLETON. I have seen it done to bring the patient to order or something like that, you know, when they get unruly; but I have seen it when it was unnecessary.

The ACTING CHAIRMAN. Is there anything else that you saw over there?

Mr. PENDLETON. In regard to ill treatment?

The ACTING CHAIRMAN. Yes.

Mr. PENDLETON. No, sir.

The ACTING CHAIRMAN. Where do you live now?

Mr. PENDLETON. I live now at Anacostia, sir.

The ACTING CHAIRMAN. What do you do? What is your business?

Mr. PENDLETON. I am a salesman with Lansburgh, on Seventh street.

The ACTING CHAIRMAN. What?

Mr. PENDLETON. I am a salesman in Lansburgh's, on Seventh street.

The ACTING CHAIRMAN. Did you like it over there?

Mr. PENDLETON. Over at the hospital?

The ACTING CHAIRMAN. Yes.

Mr. PENDLETON. I liked it fairly well, and I would have liked it better if there had been any encouragement for a young man.

The ACTING CHAIRMAN. What sort of encouragement?

Mr. PENDLETON. Better pay and something good to eat would have been very good encouragement.

The ACTING CHAIRMAN. What did you get? What was your pay?

Mr. PENDLETON. How is that?

The ACTING CHAIRMAN. What was your pay?

Mr. PENDLETON. I was getting when I left there \$22.50.

The ACTING CHAIRMAN. And your board?

Mr. PENDLETON. And board.

The ACTING CHAIRMAN. And lodging?

Mr. PENDLETON. Yes, sir.

The ACTING CHAIRMAN. Was your washing done there?

Mr. PENDLETON. Yes, sir. The lodging was very nice, and the laundry was very nice, but the board was tough.

The ACTING CHAIRMAN. What was wrong with it?

Mr. PENDLETON. It was not fit to eat, is all I can say about it.

The ACTING CHAIRMAN. Did you make complaint of it?

Mr. PENDLETON. What is the use of one making complaint? There is nobody to stick to you over there. There is no backbone to the place.

The ACTING CHAIRMAN. You do not know whether anybody would have taken notice of it if you had called attention to it or not, do you?

Mr. PENDLETON. I did call attention to it.

The ACTING CHAIRMAN. Whose attention did you call to it?

Mr. PENDLETON. I have called it to the attention of most every patient on the west side, and they would talk about it to me and I to them. I would say, "Why don't we do something about it?" I was willing to do my part, if it was not suitable to eat. I would make my kick.

The ACTING CHAIRMAN. Did you make your kick?

Mr. PENDLETON. What is the use of kicking, of one making a kick, when there are 500 or 600 to pull against you, when they haven't the backbone to stick for it even if they thought it.

The ACTING CHAIRMAN. Wendell Phillips, on the same theory, abolished slavery, you know, didn't he?

Mr. PENDLETON. What?

The ACTING CHAIRMAN. Do you not know that Wendell Phillips on the same theory abolished slavery, by continued agitation? Was there not some other reason why you did not make complaint over there?

Mr. PENDLETON. Was there any other reason that I didn't?

The ACTING CHAIRMAN. Yes.

Mr. PENDLETON. No, no other reason.

The ACTING CHAIRMAN. You were just afraid that nothing would come of it, or you thought that you would be tabooed by the attendants?

Mr. PENDLETON. I was like some of the other attendants. I was afraid of my job. I just thought that was the only job a man could get until I got out, and then I found out it is the last place a man should go to for work.

The ACTING CHAIRMAN. Well now, is there any other reason for not making a complaint?

Mr. PENDLETON. I say that is the only reason. That is the only reason I can give.

The ACTING CHAIRMAN. You speak of the food?

Mr. PENDLETON. Yes, sir.

The ACTING CHAIRMAN. Do you mean that it was not properly cooked, or what was wrong with it?



Mr. PENDLETON. In the first beginning the beef was so tough that you could hardly stick a fork in the gravy. That is a fact, and half the time the bread wasn't good; it was stale. We would get prunes for supper and tea. The tea was excellent, very good; but as for the tea for the patients you wouldn't know what it was if it hadn't been colored by the milk.

The ACTING CHAIRMAN. Do you know whether there was any reason for weakening the tea for the patients?

Mr. PENDLETON. I suppose the only reason that I could figure out was that the tea wasn't put in the water right to make the tea——

The ACTING CHAIRMAN. No, but I mean any medical reason.

Mr. PENDLETON. No, I don't know; not to my knowing.

The ACTING CHAIRMAN. What class of patients did you have under your control?

Mr. PENDLETON. I was not in charge of any ward while I was there, but I was on every ward on the west side, relieving around the different wards. The longest place I stayed was on Dawes third. I stayed there from the 29th of last May—not last May, this last May twelve months ago—until the time I was discharged.

The ACTING CHAIRMAN. I suppose you made no complaint about the cooking either, did you?

Mr. PENDLETON. It was no use for me to make a complaint. There was nobody to help me out in it. If I had made a complaint I would have been shot out of there.

The ACTING CHAIRMAN. How do you know?

Mr. PENDLETON. I have an idea that I would.

The ACTING CHAIRMAN. Why do you say you would if you do not know?

Mr. PENDLETON. Well, I think I would. That is my belief.

The ACTING CHAIRMAN. Did you try it to find out?

Mr. PENDLETON. No, I didn't try it; but that is what the boys told me.

The ACTING CHAIRMAN. Did you ever go to the board of visitors?

Mr. PENDLETON. No, sir.

The ACTING CHAIRMAN. Why did you not?

Mr. PENDLETON. But there was a bunch of them that came there.

The ACTING CHAIRMAN. When was that?

Mr. PENDLETON. I don't know exactly the time. I can't remember.

The ACTING CHAIRMAN. Was it while you were there?

Mr. PENDLETON. Yes, sir; certainly it was while I was there.

The ACTING CHAIRMAN. Were you one of those who were asked to appear before the board of visitors?

Mr. PENDLETON. No, sir; I wasn't one of them. I didn't know anything about it until they were called. A whole lot of them came around with a paper, and said "Will you sign this paper that you will come before the board of visitors and say that the food wasn't fit to eat?"

The ACTING CHAIRMAN. Did you sign that paper?

Mr. PENDLETON. If I had signed it——

The ACTING CHAIRMAN. Did you sign it?

Mr. PENDLETON. No, sir.

The ACTING CHAIRMAN. Why didn't you, if it was true?

Mr. PENDLETON. I didn't know anything about it until the visitors were up there, sir, and sent around for the men.

The ACTING CHAIRMAN. Were you asked to sign that paper?

Mr. PENDLETON. Was I asked?

The ACTING CHAIRMAN. Yes.

Mr. PENDLETON. No, sir, I was not.

The ACTING CHAIRMAN. You did not know anything about it?

Mr. PENDLETON. I did not know anything about signing the paper until the visitors were there one day and the supervisor came there and asked them to come out.

The ACTING CHAIRMAN. Did you not say to the supervisor "I know something about this; I would like to come."

Mr. PENDLETON. No, sir. If I had signed that paper I would have been one that he would have called in.

The ACTING CHAIRMAN. Irrespective of signing the paper, why did you not say that, if you knew the facts that you are detailing here?

Mr. PENDLETON. If I knew what?

The ACTING CHAIRMAN. If you knew the facts that you have been swearing to here, when the supervisor came around and said the board of visitors is out there and they want some of you people, why did you not say to the supervisor "I know something; I want to go there?"

Mr. PENDLETON. The supervisor came through my ward and said "Did you sign this paper?" I said "No." Then he went to another fellow and asked him did he sign it, and he said "Yes." He said "The board of visitors is out there."

The ACTING CHAIRMAN. I am asking you why you did not do certain things, and not what other people did.

Mr. PENDLETON. Why I did not do what, now?

The ACTING CHAIRMAN. Why did you not, knowing the information you had, that you have detailed here as a witness, when the inspector or the supervisor came around and said the board of visitors was there calling people up, why did you not volunteer to go?

Mr. PENDLETON. Well, I will tell you the reason why I didn't. I thought maybe they didn't want anybody there but what had signed the paper, and I had not been there as long then as the rest, but if I had known what I know now I would have gone.

Mr. WALLACE. You spoke of Lloyd abusing patients. Did he give you any instructions about what to say about it?

Mr. PENDLETON. Yes, sir.

Mr. WALLACE. What was it?

Mr. PENDLETON. He told me to tell the head nurse that this patient was walking down the hall and a fellow named Chapman, who was pushing a polisher, struck him in the heels and knocked him down.

Mr. WALLACE. He told you to tell him the patient did that?

Mr. PENDLETON. Yes, sir.

Mr. WALLACE. Did you know Boswell?

Mr. PENDLETON. I knew of him.

Mr. WALLACE. An attendant there named Boswell?

Mr. PENDLETON. Yes, sir.

Mr. WALLACE. Did you ever see him mistreat a patient over there?

Mr. PENDLETON. I can not say that I ever did.

Mr. WALLACE. A colored patient?

Mr. PENDLETON. I could not say—yes, I did, too. I saw him out on the grounds one day beat a patient.

Mr. WALLACE. Who was that?

Mr. PENDLETON. The patient?

Mr. WALLACE. Yes.

Mr. PENDLETON. I couldn't tell you.

Mr. WALLACE. It was a colored patient?

Mr. PENDLETON. It was a colored patient.

Mr. WALLACE. Did you know Supervisor Bunch?

Mr. PENDLETON. Burch?

Mr. WALLACE. Yes.

Mr. PENDLETON. Yes, sir.

Mr. WALLACE. What was his conduct while he was on duty, if you know?

Mr. PENDLETON. I think it was fairly good, only he was pretty rough to the attendants sometimes.

Mr. WALLACE. In what way?

Mr. PENDLETON. Well, I have known a number of times when he would try to domineer over there and he was called down.

Mr. WALLACE. What do you mean by domineering? Was it his language or physical?

Mr. PENDLETON. He tried to make the attendants think he was the whole thing.

Mr. WALLACE. What language did he use?

Mr. PENDLETON. He used common language. He didn't swear.

Mr. WALLACE. Did you ever have a patient in a bed saddle over there for two days at a time?

Mr. PENDLETON. I have, sir. I was on that ward.

Mr. BARCHFELD. What is a bed saddle?

Mr. PENDLETON. It is made of leather, across the breast, kind of like a little harness, that holds them in the bed, and a piece of wide canvas, about that wide [indicating], running down the leg, and a pad right above the knee and fastened around with a buckle, and then there is a strap that runs down and fastens around in some way, and it is tied to the bottom of the bed, so that he can not pull them up.

Mr. BARCHFELD. That is a bed saddle?

Mr. PENDLETON. I reckon so. That is what he called it—a bed saddle.

Mr. BARCHFELD. You do not know what you are talking about. That is not the description we have here of a bed saddle.

Mr. WALLACE. Who ordered you to do that?

Mr. PENDLETON. I helped Lloyd and Hawkins to put the saddle on a patient named Lindsey.

Mr. WALLACE. Were you instructed by anybody to do so?

Mr. PENDLETON. I was only told by Lloyd to help him to put it on. The patient was a very wild patient, and they couldn't keep him in his room—well, they kept him in his room, but he would tear up the mattresses. He tore up as many as five mattresses.

Mr. WALLACE. You said something about the food a while ago?

Mr. HAY. Do you mean to say that the patient was kept on the bed saddle for two days without any relief?

Mr. PENDLETON. No; only two days at a time that one time.

Mr. HAY. How many hours?

Mr. PENDLETON. I think it was two days and two nights.

Mr. HAY. That is what I wanted to get at.

Mr. PENDLETON. And at the same time we washed out his stomach, and we had to tie his hands to keep him from fighting at us, and we could hardly handle him then. He was a patient that came from the sham battle at Manassas.

Mr. WALLACE. Did you ever take anything like rotten fish off of the table there?

Mr. PENDLETON. I certainly have.

Mr. WALLACE. State what that was.

Mr. PENDLETON. One day Hawkins and a fellow named Bernard Allen and myself were sitting at the same table, and the odor of the fish was so bad that we set it off on the radiator right below the table. Miss Burch came around and set it back on the table, and we set it off again; and the next time she came around she raised Cain about it and said she would report us for it. We didn't say anything, so we set it off again, and that evening the supervisor called us out there and wanted to know what we were doing, setting the fish off the table. We told him the reason we did it for, and he said "Well, you will have to go before the superintendent." I told him we was ready to see the superintendent, because it was due for us to go before him. Well, they talked about that fish story a right smart while.

Mr. WALLACE. Were you reported?

Mr. PENDLETON. I was reported to the supervisors, but whether they took it before the superintendent I don't know. Anyway it died out, and we never heard any more about it.

Mr. WALLACE. Did you ever carry any patients out on to the grounds when the board of visitors would meet there?

Mr. PENDLETON. I have, sir.

Mr. WALLACE. Did you have any instructions to do that?

Mr. PENDLETON. The men would say: "The board of visitors is coming through. Let's get our patients out."

Mr. WALLACE. What was your object; to carry them before the board of visitor or away from them?

Mr. PENDLETON. To carry them away from them, sir. If we were going to leave them for the board of visitors to see we would have left them in the wards.

Mr. WALLACE. Where did you take them?

Mr. PENDLETON. Out on the hill, under the shade trees, where they have settees for them to sit.

Mr. WALLACE. How far was that from the ward?

Mr. PENDLETON. It was probably 150 yards, the best I can tell you.

Mr. WALLACE. Did you take them out there on the other days too?

Mr. PENDLETON. Yes, we took them out every day, but we were in a little hurry to get them out that day because the visitors were expected to come through at 2 o'clock. I never saw them.

Mr. WALLACE. Was the object to keep the board of visitors from seeing them?

Mr. PENDLETON. I don't know what the object was. I was not in charge of any ward.

Mr. WALLACE. You say you were instructed to do that?

Mr. PENDLETON. Yes, I was instructed.

Mr. WALLACE. Who instructed you?

Mr. PENDLETON. Whatever ward I was relieving on—I won't say any special ward. I was relieving pretty much all the time, and was

on no special ward at all. The ward I was last on was a nice ward and was kept in nice trim, and there was a good class of patients there.

Mr. HAY. What was the reason that was given you for your discharge?

Mr. PENDLETON. Well, the supervisor told me I was detailed to take a wheelbarrow and a broom and shovel and go around the buildings and sweep up the paper, and sweep the streets, I suppose. He said I was to do this cleaning up, and I said, "I am?" He said, "Yes." I said, "And that is all you want me to do?" He said, "Yes." He said, "You have got to do it or give up your keys." I said, "I will give up my keys." He said, "Give me the keys." I handed them over to him and he said, "You are discharged." I said, "Are you acting as superintendent?" He says, "Well, I have the authority to discharge you." I says, "You can not discharge me. You have no authority, in my estimation. Dr. White hired me and I think he has the right to discharge me." He said, "Dr. White is in New York." I said, "Well, I will wait until he comes back, and I think Dr. White will tell you the same thing." When he came back, I went and had a talk with him in regard to the supervisor not giving me a fair show.

Mr. HAY. And he upheld the supervisor?

Mr. PENDLETON. I suppose so.

Mr. HAY. He discharged you?

Mr. PENDLETON. Yes, sir; I suppose he upheld the supervisor.

Mr. HAY. Did you ever strike a patient yourself?

Mr. PENDLETON. Yes.

Mr. SMYSER. He says that he struck a supervisor and broke his knuckles.

Mr. HAY. Oh, that has been gone over, has it?

Mr. SMYSER. Yes.

Mr. HAY. Was any other attendant present?

Mr. PENDLETON. I do not think there was any attendant right there when I struck the patient, but they knew about it afterwards.

Mr. HAY. Was that reported to the superintendent, that you know of?

Mr. PENDLETON. No, sir; I think not. I am quite sure. I never heard anything of it.

Mr. HAY. Was it reported to the supervisor?

Mr. PENDLETON. I told Dr. Glasscock how I hurt my hand. He asked me how I broke my knuckles, and I told him I struck a patient. He said, "What for?" and I said, "You see my hand was in a sling here and the patient was coming at me like all fire, and I had to protect myself." Well, I didn't hurt the patient. I struck at him and he threw up his arm, and I hit him on the elbow, and that is how I broke my knuckles.

Mr. BARCHFELD. What was the patient doing when you struck him?

Mr. PENDLETON. He was coming at me just as hard as he could.

Mr. BARCHFELD. What was the trouble with the patient?

Mr. PENDLETON. He was just naturally crazy.

Mr. BARCHFELD. Crazy?

Mr. PENDLETON. Yes, sir; that is what he was put in there for.

Mr. BARCHFELD. You say you had your arm in a sling. What was the matter with your arm?

Mr. PENDLETON. I had blood poisoning.

Mr. BARCHFELD. There was no chance in the world for you to get away from this man, I suppose.

Mr. PENDLETON. No, he caught me right in the door.

Mr. BARCHFELD. It is just such charges as this that we are investigating now—cruelty. You are a star witness as a cruelty witness. I think if I had been similarly situated, and I had been attacked by a crazy man, or saw a crazy man coming at me, that I would have gotten away from him.

Mr. PENDLETON. How about if you couldn't get away? How about if you were in a corner, is there any way of getting out then?

Mr. BARCHFELD. Well, there is always a way to get away from those things.

Mr. PENDLETON. There is not always a way to get out of the way of a crazy man. I was there seventeen months, and that is a right good experience. Of course it is not as long as some of them have been there, but it is a good deal longer than some of them had been there, too.

Mr. BARCHFELD. I have had some experience among crazy people.

Mr. PENDLETON. Have you?

Mr. BARCHFELD. Are you a member of the Attendants' Protective Association?

Mr. PENDLETON. I joined them and paid my initiation fee, but I dropped out. I saw there was no backbone to it.

Mr. BARCHFELD. You are not a member now?

Mr. PENDLETON. No, sir. They said it had done a good deal of good there, but I never—

Mr. BARCHFELD. You could not see it?

Mr. PENDLETON. I could not see it.

Mr. BARCHFELD. What was their object?

Mr. PENDLETON. I do not know what their object was, but after I paid my initiation fee I could see that I was wrong in joining it. I thought I was.

Mr. BARCHFELD. What was the initiation fee?

Mr. PENDLETON. One dollar.

Mr. BARCHFELD. And your dues?

Mr. PENDLETON. I never paid any dues.

Mr. BARCHFELD. What were they supposed to be?

Mr. PENDLETON. Twenty-five cents a month, I think.

#### TESTIMONY OF J. H. CROXDALE.

J. H. CROXDALE, having been duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. CROXDALE. J. H. Croxdale.

The ACTING CHAIRMAN. Were you ever connected with the hospital in any way?

Mr. CROXDALE. I was not; no, sir.

The ACTING CHAIRMAN. You were not an employee or attendant?

Mr. CROXDALE. No, sir.

The ACTING CHAIRMAN. So far, then, as the treatment is concerned perhaps you do not know anything about it?

Mr. CROXDALE. No, sir; nothing at all; no, sir.

The ACTING CHAIRMAN. I must confess that I do not know just why you are here. Is it with reference to some case that you have had pertaining to a patient?

Mr. CROXDALE. I presume so.

The ACTING CHAIRMAN. Who was the patient?

Mr. CROXDALE. Mr. Bastin.

The ACTING CHAIRMAN. Did you have any litigation for him?

Mr. CROXDALE. He was confined there in 1894, and he remained there until the 8th of June, 1905, and was discharged.

The ACTING CHAIRMAN. Discharged how?

Mr. CROXDALE. By the superintendent.

The ACTING CHAIRMAN. As recovered?

Mr. CROXDALE. As recovered; but the court had not issued an order restoring him to his former legal status as a sane man and he came to me to take some steps in his behalf in that regard. He had been to see me before he was discharged from the hospital and he wanted me to get him out. He thought he was all right and I suggested to him that probably he had better wait and see, and on the 8th of June he was discharged and a certificate as to his discharge was issued by Dr. White and filed with the clerk of the Supreme Court of the District of Columbia. After this time he came to me and wanted me to have him restored to his former status as a sane man. I made some investigation and went to see his committee, Mr. Fenning, thinking that in view of the fact that he was his committee he would be disposed to take some steps in the matter. But he did not seem inclined to do so. I let the matter rest for a time and then went to see him again. I told him the man had been discharged and that he seemed to be all right, and that it seemed to me that some steps should be taken or it was due him that some steps should be taken to restore him to his legal status as a sane man. Mr. Fenning did not think so and refused to do anything. Then I told him what I was going to do and he said he would oppose it. I filed a motion in the Supreme Court of the District of Columbia for an order of the court restoring him to his former legal status as a sane man. Following this Mr. Fenning went before the court with a motion of which I had no notice for permission to subject this man to a medical examination. The motion was granted, and on the 25th of October, I believe, he was examined by Dr. Hummer and Dr. Nevitt. They pronounced him sane. The motion came up for a hearing on, I believe, the 27th of October, and the court issued an order restoring him to his former legal status as a sane man and at the same time ordered his committee to make a final accounting to the auditor and turn over all funds then held by him to Mr. Bastin. The doctors were each allowed for this examination \$25. These fees were filed with the report of the committee to the auditor and I filed a bill of exceptions—not so much because of the amount but because of the principle involved. I held that the examination to which he was subjected was unnecessary and was irregular and could serve no purpose.

Furthermore, that these men to whom the fee had been paid, owing to the relations which they sustained, one to the District government and the other to the institution where this man was confined, were not entitled to charge these fees; but the court had granted the permission for the examination and also stipulated in this motion that the fee should not be in excess of \$25 each, and was not inclined to

disallow the fees. The exception was overruled and the fees were paid.

The ACTING CHAIRMAN. Is that your practice here in such cases, for the court to fix the fees?

Mr. CROXDALE. I beg your pardon?

The ACTING CHAIRMAN. Is that the practice here in such cases, for the court to fix the fees?

Mr. CROXDALE. Well, I can not say in that regard. Ordinarily it would be proper for the court to say that the fee should not be in excess of a certain amount. There is no objection to that, as I understand; but for the service rendered I thought that even in that case the fees were excessive—\$25 for thirty minutes' work on the part of one man and thirty minutes' work on the part of both men, for that matter. Of course, it took Dr. Hummer, we will say, an hour to come from the hospital and an hour to go back, and the examination lasted for thirty minutes. That was \$50 for about three hours' work.

The ACTING CHAIRMAN. Did you make your report of the excessive fee to the court?

Mr. CROXDALE. Yes, sir; I did.

The ACTING CHAIRMAN. And the court, notwithstanding your exception, adhered to the allowance of the fee. That is right, is it not?

Mr. CROXDALE. Yes, that is right.

Mr. HAY. You say that one ground of your exception was that Dr. Hummer was a——

Mr. CROXDALE. Government employee.

Mr. HAY. That he was an officer, or rather on the medical staff of the Government Hospital for the Insane, from which place this man had been discharged as sane by the superintendent?

Mr. CROXDALE. Yes.

Mr. HAY. And you thought that it was not the province of this man to make this examination. Is that the idea?

Mr. CROXDALE. I did not understand the last part of that.

Mr. HAY. That it was not the province of Dr. Hummer to make this examination?

Mr. CROXDALE. Well, it was virtually asking him to go over the head of the institution where he was employed. Dr. White had issued a certificate to the effect that this man had recovered and was at that time, on the 8th of June, of sound mind. This was an investigation following. I am unable yet to see what purpose this examination could have served.

Mr. HAY. Do you know anything about any of the other fees charged by physicians in any other cases?

Mr. CROXDALE. Well, I know that I had this man examined by two gentlemen, and they did it as an act of charity.

Mr. HAY. It has been testified——

Mr. CROXDALE. And in some instances men are allowed fees of \$50.

Mr. HAY. It has been testified here that no one employed at the institution as a physician ever got over \$10. I think that is it. That is my recollection of it.

Mr. CROXDALE. Well, Dr. Hummer is employed there, and he got \$25 in this instance, and I believe that Judge Anderson at this time stated to me that he had allowed a certain gentleman employed in



the institution \$50 in one instance, when I urged that in any event this was excessive.

Mr. HAY. Was that a case, where he got \$50, where the man had been an inmate or was an inmate of the Government Hospital?

Mr. CROXDALE. I could not say in that regard, sir.

Mr. HAY. I suppose after the man was declared sane by the court Mr. Fenning paid him over what was due him, did he, without any further trouble?

Mr. CROXDALE. Well, no. I had to go into court and file another motion, and he opposed that. He stated that there were certain matters pending and that he wanted to close the whole matter out at one time, and that it was child's play for this man to want his money. The court promptly told him that it was his and he was entitled to it, and that it was not child's play—that he was simply asking for his rights.

Mr. HAY. Was this man a soldier or a citizen?

Mr. CROXDALE. He was a soldier.

Mr. HAY. How much money did he have?

Mr. CROXDALE. He had somewhere in the neighborhood of \$2,000.

Mr. HAY. \$2,000?

Mr. CROXDALE. Yes, sir.

Mr. BARCHFELD. Was he a patient at the time this fee of \$25 each was charged by the physicians?

Mr. CROXDALE. Was he?

Mr. BARCHFELD. Yes.

Mr. CROXDALE. He was not. He was released from the hospital on the 8th of June, last year, and this examination was on the 25th of October.

Mr. BARCHFELD. Do you not know that a physician can charge any reasonable fee?

Mr. CROXDALE. I beg your pardon.

Mr. BARCHFELD. Do you not know that a physician, like an attorney, can charge any reasonable fee that he sees fit?

Mr. CROXDALE. Yes, certainly; certainly.

Mr. BARCHFELD. What was your experience with cases of this kind that you should question the fee?

Mr. CROXDALE. Well, I didn't think the examination was necessary and I do not see yet where it served any purpose whatever. I did not think that the committee was warranted in going in in an ex parte proceeding and doing this. He went in and filed a motion as the committee. I was not notified of that. He made his argument or representations there and was granted permission by the court to subject him to the examination. The law in that regard is to the effect that a certificate issued by the superintendent of the institution shall be sufficient in warranting the court in issuing this order.

Mr. HAY. That is law, is it, in the District?

Mr. CROXDALE. Oh, yes, in the District. This is the act of February 23, 1905. I do not know just what the object of the examination was. I do not see yet what purpose it could have served. I do not think the finding of these physicians would have been findings of the court at all.

Mr. BARCHFELD. He may not have been sane at the time of the examination of June 8th?

Mr. CROXDALE. But that was not a proper proceeding had he been insane. There is no law in the District to warrant any such proceeding.

Mr. BARCHFELD. Where is your man now?

Mr. CROXDALE. Out at the Soldiers' Home.

Mr. BARCHFELD. Is he insane?

Mr. CROXDALE. No, sir, he is not.

Mr. BARCHFELD. Where is he?

Mr. CROXDALE. At the Soldiers' Home.

Mr. BARCHFELD. But where?

Mr. CROXDALE. Here in the District.

Mr. HAY. I understand you to say that the law of the District now is that the certificate of the superintendent of the Government Hospital for the Insane shall be taken as evidence of the man being sane upon a proceeding in court to have him restored to his legal rights?

Mr. CROXDALE. Section 2 of this act of February 23, 1905, provides that where a patient recovers and is discharged that the superintendent shall issue a certificate to that effect, and it further provides that this certificate shall be sufficient evidence for the court to issue the order restoring him to his former status as a sane person. That is the law.

Mr. HAY. Then this Mr. Fenning, who had this man's property, when he interposed and undertook to say that he was not sane—What purpose could he have had; because what he would wish to do, I presume, would be to be safe in turning over to him what was in his hands.

Mr. CROXDALE. Well, I could not say in that regard what purpose he had. He admitted that he was not a man who was used to having any considerable amount of money, and he did not think it would be right to give him his money. That in some instances, you know, or in many instances, is true. With a man who has not been accustomed to handling money it is not wise to allow him to use any considerable amount of money, because he might use it improperly.

Mr. HAY. And that was the reason assigned by him?

Mr. CROXDALE. Well, yes; in substance it was; but he interposed every obstacle he possibly could to prevent him from getting his money, and he made it cost him in the neighborhood of \$200 to get his money, when he should have known that he could not prevent him from getting it.

Mr. BARCHFELD. We were talking about the fees, and you were commenting on the doctors' fees. What was your fee in this case, if it is a fair question?

Mr. CROXDALE. Well, now, my fee in the case was \$100. It was not necessarily the amount of the fee that was at issue. It was the question of the right to impose this upon this man under the circumstances. I thought that the man, or any man who is so unfortunate as to become a public charge or ward of the Government, is entitled to an economical or judicial administration of his estate, and to the protection of the courts, that it may not be wasted; and I looked upon this as a practical waste of his money, because he was not benefited in any way as a result of the examination.

Mr. BARCHFELD. Who employed you in the case?

Mr. CROXDALE. He employed me himself.

Mr. SMYSER. How do you associate, however, what was done in Basten's case with the management of this institution out here?

Mr. CROXDALE. Well, that is independent. I do not see that the management of the institution has anything to do with that.

Mr. SMYSER. I am trying to look for the connection.

Mr. CROXDALE. I could have told you when I came here that I knew very little that would be of any benefit to you. I was asked to come up here.

Mr. SMYSER. I am sure we are very glad to have you here, Mr. Croxdale, but I am trying to look for the connecting link.

Mr. CROXDALE. Well, I will answer your questions, sir. I will answer your questions to put.

Mr. HAY. I presume that the extent of it is that the charge has been made by these gentlemen of the Medical Legal Society that this Mr. Fenning did not properly administer his duty, and they thought, I suppose, that your evidence would tend to show that. I reckon that is it.

Mr. CROXDALE. If you have any questions to ask that I am able to answer I will be glad to answer them.

Mr. SMYSER. Perhaps it would be well if our scope was broadened so that we could investigate your courts a little.

Mr. CROXDALE. I do not know. I do not consider that I have said anything that can in any way reflect on the courts.

Mr. SMYSER. I do not intend any reflection on you.

Mr. CROXDALE. No; I mean on the courts. There is such a thing, you know, as a court being imposed upon.

Mr. HAY. The court did not order this examination, I suppose?

Mr. CROXDALE. Well, I suppose if I came into court and asked the permission of the court to do a certain thing for my client the court would assume that I am competent to look after the interests of my client; and if there is no one there to represent the other side, probably the court would assume that there was no other side and it would grant the order. This motion was filed—

Mr. HAY. By Mr. Fenning?

Mr. CROXDALE. Yes, and it was an ex parte proceeding; and it was granted.

Mr. HAY. Asking that he be allowed to examine his ward?

Mr. CROXDALE. Yes, his ward. The intention of this act, as I understand it, was to simplify proceedings of that kind. It is entitled "An act to change to lunacy proceedings of the District of Columbia when the Commissioners are the petitioners, and for other purposes." In that particular case it was too expansive. I thought possibly that could be remedied by changing the second of that act to read, instead of "sufficient" "conclusive," and I believe that the opinion of Doctor White and his staff of physicians there is better than the opinion of any judge or jury as to the mental status of a man, and I think the court would be perfectly safe in acting upon these certificates without further evidence. I think that was the intention of the law, but it does not read that way.

Mr. HAY. The court and jury, at last, have to take the evidence of Dr. White and his physicians there, anyway, do they not? That is the way they form their opinions, from what they say?

Mr. CROXDALE. Not necessarily.

Mr. HAY. Not necessarily, but generally there is one of them over there at the court—generally Doctor White or some other physician on the staff there?

Mr. CROXDALE. I understand that when that bill was framed it was the intention that this should be conclusive, but there is a discretion left with the court—if it shall be sufficient.

Mr. SMYSER. As a practical lawyer, your judgment would be that the certificate of discharge by Dr. White ought to be conclusive as to the patient's recovery?

Mr. CROXDALE. As to his condition, yes, sir. I think the consensus of opinion of those men over there is worth more than the opinion of any jury or any judge. I think that change in that particular section would be a wise one. I do not see wherein it could be fraught with any mischief.

#### TESTIMONY OF WILLIAM J. LOGUE.

WILLIAM J. LOGUE, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. LOGUE. William J. Logue.

The ACTING CHAIRMAN. Where do you live, Mr. Logue?

Mr. LOGUE. I live in Washington, sir.

The ACTING CHAIRMAN. Were you connected in any way, at any time, with St. Elizabeth's Hospital?

Mr. LOGUE. Yes, sir; I was an inmate there for several years.

The ACTING CHAIRMAN. How long since?

Mr. LOGUE. Six months ago.

The ACTING CHAIRMAN. When were you committed there?

Mr. LOGUE. In 1899.

The ACTING CHAIRMAN. And when were you discharged or released?

Mr. LOGUE. Six months ago, sir.

The ACTING CHAIRMAN. You were relieved as recovered, I take it?

Mr. LOGUE. I was relieved by writ.

Mr. HAY. Have you been a soldier? Were you in the Army?

Mr. LOGUE. Yes, sir.

The ACTING CHAIRMAN. You were relieved on the oath of Dr. White?

Mr. LOGUE. Yes, sir.

The ACTING CHAIRMAN. Since Dr. White has been there, you were there about two years after he was made superintendent, were you not?

Mr. LOGUE. About eighteen months or so; yes, sir.

The ACTING CHAIRMAN. How was the food while you were out there?

Mr. LOGUE. Well, the food was plentiful, but it was rather coarse for the class of people that was where I was—in the department I was in.

The ACTING CHAIRMAN. What department were you in?

Mr. LOGUE. I was under Dr. Hummer.

The ACTING CHAIRMAN. How was it cooked?

Mr. LOGUE. It was cooked by ranges, part of it by steam and part by fire. It was cooked—boiled.

The ACTING CHAIRMAN. In large quantities?

Mr. LOGUE. Yes, sir.

The ACTING CHAIRMAN. How was the cooking; good or bad?

Mr. LOGUE. Well, I should say the cooking was bad.

The ACTING CHAIRMAN. What was the trouble?

Mr. LOGUE. That is, it was not cooked proper, or palatable—food a man would relish what was put before him. It was the same as the salt beef. It was partly cooked, and quite rare and tough. The beans were probably two-thirds cooked sometimes. I wouldn't say always, but part of the time.

(At this point Mr. Olcott resumed the chair.)

Mr. SMYSER. How often did Dr. White visit the establishment or wards that you were in?

Mr. LOGUE. I don't know as I ever seen the gentleman only once in my ward. I have seen him pass through—around the buildings and through them several times, but I never seen him in the wards. That is, I was not in the ward when he passed through it.

Mr. SMYSER. Did the board of visitors ever come in there?

Mr. LOGUE. Well, yes; once every three months.

Mr. SMYSER. Did you ever make any complaint to anybody?

Mr. LOGUE. No, sir; only to Mr. Hummer.

Mr. SMYSER. What was your complaint?

Mr. LOGUE. I had a little grievance to make to him one time. I said I would like to go away from there and I would like to see Dr. White to speak to him in regard to going away, and he told me all right, and that was the last of it until I tried to get out myself. Then I seen Mr. White just before I left.

Mr. SMYSER. Did you have to resort to habeas corpus?

Mr. LOGUE. Yes, sir.

Mr. SMYSER. Did you ever send any messages to Doctor White that were not delivered?

Mr. LOGUE. I sent him a small note one time by Doctor Hummer, and Doctor White told me that he never received no note. Mr. Hummer, of course, said that I never give him any. The three of us were in the room together, and I didn't say much about it at that time. I was about ready to leave then. I thought it was kind of small of Hummer to say that he would do me the favor and then not do it. That was all.

Mr. SMYSER. He said you did not give him the note?

Mr. LOGUE. He spoke up like a youngster and said, "Oh, no; you never give me no letter."

Mr. SMYSER. Did you get your pension money when you were out there?

Mr. LOGUE. No, sir.

Mr. SMYSER. Did you get any when you left?

Mr. LOGUE. I drewed \$300 by going to court over here from the guardian that was appointed over it. I got \$200.

Mr. HAY. You had \$300 coming and you got \$200?

Mr. LOGUE. There is about \$500 laying back yet somewheres. I don't know where it is. Fenning is supposed to have it. This man Fenning that they talk so much about.

The CHAIRMAN. Did you have an attorney collect this \$300?

Mr. LOGUE. I did; yes, sir.

The CHAIRMAN. Who was the attorney?

Mr. LOGUE. The attorney was Mr. Evans.

The CHAIRMAN. Mr. R. P. Evans?

Mr. LOGUE. Yes, sir.

The CHAIRMAN. You paid him something for his services, did you not?

Mr. LOGUE. Yes, sir.

The CHAIRMAN. How much did you pay him?

Mr. LOGUE. I gave him \$75 for the writ, for getting the \$200 from this Mr. Fenning.

The CHAIRMAN. You actually received \$200?

Mr. LOGUE. Yes.

The CHAIRMAN. And besides that there was enough left over to give Mr. Evans his fee? Is that it?

Mr. LOGUE. No, sir; I paid Mr. Evans out of what I received.

The CHAIRMAN. Out of the \$200?

Mr. LOGUE. Out of the \$200. I never received nothing at the asylum. I received \$13 that was sent there, I understood, for pin money, and I left \$12 there. When I was discharged I got nothing from the asylum only what I had on my back.

Mr. HAY. I was going to ask what your pension was?

Mr. LOGUE. I don't know how Mr. Fenning came to draw the pension when it was drawn over there. My name was on the rolls over at the asylum, and the pension was drawn there and turned over to him.

The CHAIRMAN. He was appointed as your committee, was he not?

Mr. LOGUE. I don't know. I never got no notification of it at no time.

Mr. HAY. What was your pension? How much did you get?

Mr. LOGUE. \$8.

Mr. HAY. And you never received any of it all the time you were there?

Mr. LOGUE. I received \$13, a year ago, from April up to now a year ago. I got \$13 over there.

Mr. HAY. How long had you been drawing a pension before you were at the hospital?

Mr. LOGUE. I have been drawing a pension ever since 1885.

Mr. HAY. How long were you in the Army?

Mr. LOGUE. Twenty years.

Mr. HAY. Were you in the Army during the war?

Mr. LOGUE. Yes, sir.

Mr. HAY. In what command did you serve?

Mr. LOGUE. I served in the cavalry over in Virginia, under Kilpatrick and Davis.

Mr. HAY. You were getting \$8 a month when you went to the hospital, and you were there how many years?

Mr. LOGUE. I was there pretty near seven years—six years and over.

Mr. HAY. Then there was drawn for you while you were at the hospital about \$700?

Mr. LOGUE. \$648.

Mr. HAY. \$648?

Mr. LOGUE. Yes, sir; outside of the interest that would be on it if it had been put at interest the same as the man said he did.

Mr. HAY. You only got \$300. Do you know whether any part of that was applied by the superintendent of the hospital for your support while you were there?

Mr. LOGUE. I have never got no notification of any of it being held out; no, sir.

Mr. HAY. Were there any different kind of clothes furnished you from what were furnished all the other inmates?

Mr. LOGUE. No, sir.

Mr. HAY. Did you have a different kind of food from what the others had?

Mr. LOGUE. No, sir; I drew the general run of clothes over there, and of course the rations were all alike.

Mr. HAY. Did you get any chewing tobacco or smoking tobacco, outside of what they gave to all of the patients?

Mr. LOGUE. No, sir.

Mr. HAY. You did not?

Mr. LOGUE. No, sir.

Mr. HAY. Are you a man of family?

Mr. LOGUE. No, sir.

Mr. HAY. You are not?

Mr. LOGUE. No, sir.

Mr. HAY. Is there anybody dependent on you?

Mr. LOGUE. No, sir.

Mr. HAY. What excuse did your guardian give for only paying over to you \$300?

Mr. LOGUE. I only received \$200—\$213 in all, out of the \$648.

Mr. HAY. Has he made a final settlement of his accounts?

Mr. LOGUE. Not yet, sir; no, sir.

Mr. HAY. He has not made a final settlement?

Mr. LOGUE. Not to me.

Mr. HAY. I understand the hospital is claiming \$200 or \$300 as belonging to them for having sustained you out there. That is the trouble?

Mr. LOGUE. Well, I don't know what the trouble is. If I owed the hospital anything there they should have squared it up before I left, as far as that is concerned. They are the ones that drew the money first and then turned it over to Fenning. Of course I never put myself to any trouble about it. I took the thing easy, and I was awaiting the decision of the judge up here. There is an order, so I believe, to take one-third, but that was issued after I was discharged, and therefore I didn't think myself that I would come under that order. That was issued from the Interior Department, in regard to taking one-third.

Mr. HAY. One-fifth, or one-sixth, is it not?

Mr. LOGUE. One-third, I believe it is. I forget. I have seen the order, too, but it takes part of it, anyhow, for little ins and outs that you receive over there. I received no ins and outs, and I had no money. They had it all to themselves. If I owed them money they should have took out what belonged to them and give me the rest and let me go.

Mr. SMYER. You said something about a decision that was to be made by a judge.

Mr. LOGUE. Yes.

Mr. SMYER. I suppose that you contend that Fenning, your guardian, or committee, as they call it here, has in his hands money belonging to you?

Mr. LOGUE. Yes.

Mr. SMYSER. Mr. Fenning says, "Not so," and now the court is about to decide that question.

Mr. LOGUE. Yes, sir; I believe that is the way of it.

Mr. HAY. What was the necessity of Mr. Fenning qualifying as your guardian, anyhow?

Mr. LOGUE. I don't know. He never seen me and I never seen him.

Mr. HAY. Do you know how long before you were discharged he qualified as your guardian?

Mr. LOGUE. About a year. That is the first I heard of it. I heard from a patient that this man Fenning was my guardian. This patient had business with him over here in the city and he came over and said to me, "I have got good news for you. Your money is all right over in the city, drawing 4 per cent interest. This man Fenning," he says, "has got it, and he told me to tell you." I said, "I don't know Fenning." About a month afterwards this man Fenning came over and seen me. I seen Fenning once when he came to see me and when I was released I saw him in the court room and he never spoke to me or made a move to support me when I came out or anything. I had to rustle to get money to keep up until I got this \$200 out of him.

Mr. BARCHFELD. Where are you living now?

Mr. LOGUE. I am living on C street northwest, out here, No. 453.

Mr. BARCHFELD. You have not been at any home or institution since you left there, have you?

Mr. LOGUE. Well, yes; I did. I went on a visit to the Soldiers' Home up here a week, and then came back again.

Mr. BARCHFELD. You alternate between C street and the Soldiers' Home?

Mr. LOGUE. Yes, sir.

Mr. BARCHFELD. You change occasionally?

Mr. LOGUE. Yes, sir.

Mr. HAY. Did any of the physicians out there talk to you about whether or not you had a pension?

Mr. LOGUE. This man saw Mr. Hummer, about two years ago—in the first place, I asked to come to town. I wanted to come over to see some of my neighbors, and he asked me if I had any money. I spoke right out, and I said, "Yes, I have got lots of it." "Where is it?" he says. I said, "In the United States Treasury"—just that way. He spoke up quick, and says, "Are you a pensioner?" I says, "Yes." "Very well," he says, "It is pretty hard to take an attendant to go to town without any money." He says, "If you have got money you can go and pay their way, too." I told him I didn't come over there to pay attendant's way, or car fare backward and forward, in quite a joking way to him. Then he went off and in about six months after that I heard about this man Fenning being my guardian. He was the only one I ever mentioned the question to.

I made up my mind while I was there that I was there, and I was waiting the decision of the doctors or somebody else for to turn me loose, but I was willing to go at any time, and I would just as leave that that money would stand where it was, in good hands in the Pension Department, which was better than Fenning's, in my estimation, so that when I got out I would have something to start on; but as it is now I am poorer than I was when I first went over there, or I will be if it holds out much longer.



Mr. HAY. You were discharged from the Army, of course?

Mr. LOGUE. Yes.

Mr. BARCHFELD. How old a man are you, if it is a fair question?

Mr. LOGUE. On the 4th day of July I will be 66 years old, sir.

#### TESTIMONY OF MILTON BERRY.

MILTON BERRY, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. Where do you live?

Mr. BERRY. I live on Georgia avenue, SE.

The CHAIRMAN. Were you ever employed in St. Elizabeth's?

Mr. BERRY. I was.

The CHAIRMAN. When?

Mr. BERRY. I went there in 1903, and I was discharged in 1904.

The CHAIRMAN. What were you discharged for?

Mr. BERRY. For refusing to clean brick.

The CHAIRMAN. Refusing to do what?

Mr. BERRY. To clean bricks.

The CHAIRMAN. Who made the complaint against you?

Mr. BERRY. Dr. Hummer to Dr. White.

The CHAIRMAN. Dr. Hummer made a complaint to Dr. White?

Mr. BERRY. Yes, sir.

The CHAIRMAN. Did Dr. White send, then, for you?

Mr. BERRY. Yes, sir.

The CHAIRMAN. Did he ask you why you refused to clean those bricks that you were told to clean?

Mr. BERRY. Yes, sir; he asked me. I told him I was not employed there to clean brick, I didn't think. I told him it was out of my duty.

The CHAIRMAN. What instructions were given to you when you were first employed as to what your duties were?

Mr. BERRY. There was not any instructions given me at all when I was employed there. I was working patients down there, cleaning bricks, you know, myself and three other attendants. They was tearing down that building and cleaning the bricks. We each had 15 or 20 patients apiece cleaning the bricks. We were supposed to look over them while they were cleaning them, and Dr. Hummer he issued orders for the attendants to help the patients clean the bricks. When he came down and asked why I wouldn't clean the bricks, I told him that I was not employed there to clean bricks and I wouldn't do it. He said I would either clean the bricks or disconnect myself from the hospital. The other attendants wanted to keep their \$18 job, I suppose, and they went ahead and cleaned the bricks, because it was the only job they could get. I gave mine up.

The CHAIRMAN. You were in the hospital, then, a year?

Mr. BERRY. Eighteen months, or little over.

The CHAIRMAN. Did you see Superintendent White there often?

Mr. BERRY. Yes; I seen him quite often.

The CHAIRMAN. Whereabouts?

Mr. BERRY. Around through the institution and grounds.

The CHAIRMAN. Did you see him in the ward where you were in charge of the patients?

Mr. BERRY. I never seen him there over twice or three times. I wasn't on the wards very much.

The CHAIRMAN. Why?

Mr. BERRY. The ward I was on was relief 5, and the men there worked on the farm. I was the second attendant on the ward, and after we got through our ward duty I would take the remaining attendants on the ward, what didn't go on the farm, and clean up the farm around there during the day. That was the work they give me.

The CHAIRMAN. Was it not a custom for the attendants to help the patients work? I mean to set them an example of work, and things of that kind.

Mr. BERRY. On the wards; sure.

The CHAIRMAN. Was not that so when you were outside?

Mr. BERRY. Not as I know of.

The CHAIRMAN. When you were cleaning up the grounds with the patients you would do a little cleaning up yourself, would you not?

Mr. BERRY. I never objected to that. I did that for exercise.

The CHAIRMAN. Do you not think that is the reason Dr. Hummer told you to clean the brick?

Mr. BERRY. I thought when it came down to cleaning brick it was getting a little too tough. I told him if I wanted to clean bricks I could get a job in town at \$1.50 a day cleaning brick. I never objected to helping around the grounds, raking the grounds and things of that sort. I used to do that for fun, but when it came down to telling me that I had to do it or disconnect myself, I thought I had better disconnect myself.

The CHAIRMAN. You thought that if you liked to do things that were outside of your regular duty as an attendant you would do that, but if you did not like to you would not?

Mr. BERRY. Sure. He knew I didn't have to do it, and he knew it was not my place and I didn't have to do it. I would do it of my own accord, but I wouldn't do it when I was told I would have to do it.

The CHAIRMAN. Did you tell Dr. White about this?

Mr. BERRY. Yes, sir. Doctor White asked me if I thought it was a disgrace to clean brick, and I told him no; but I thought it was a disgrace for an institution of that kind to ask an attendant to clean them.

The CHAIRMAN. Did you ever see the board of visitors there?

Mr. BERRY. Yes, I have seen them going through the wards; but I wasn't in the wards at the time they went through.

The CHAIRMAN. How about the food?

Mr. BERRY. The food was very common.

The CHAIRMAN. What was the matter with it?

Mr. BERRY. Well, it was not good. It was not pure, for one thing—the meat wasn't.

Mr. SMYSER. Was not what? Pure?

Mr. BERRY. No; it was not fit to eat. It was not sound.

The CHAIRMAN. Do you mean that that was generally so?

Mr. BERRY. Well, sometimes we had good meat and then again we didn't.

The CHAIRMAN. Did you have good meat oftener than you had bad meat?

Mr. BERRY. No, sir; we did not.

The CHAIRMAN. You had bad meat most of the time, did you?

Mr. BERRY. Yes.

The CHAIRMAN. And that was so from the time you first went in there?

Mr. BERRY. Well, it was so before Doctor White came there and it was so after he came. It didn't get any better. The beefsteak was tough and tasteless.

The CHAIRMAN. Did you ever make complaints about that?

Mr. BERRY. Yes, I made complaints every day; but it didn't get any better, though.

The CHAIRMAN. Who did you make the complaints to?

Mr. BERRY. To the supervisors.

The CHAIRMAN. Did you ever talk to any of the doctors about it?

Mr. BERRY. Yes; I have talked to Doctor Simpson about it when he was there.

The CHAIRMAN. Who was the supervisor that you talked to about it?

Mr. BERRY. Supervisors Stoner and Carter, and Estep.

The CHAIRMAN. Was there enough food?

Mr. BERRY. No; very often it run short.

The CHAIRMAN. What did you do when it ran short?

Mr. BERRY. Do without it.

The CHAIRMAN. Did you ever go down in the kitchen and get a fresh supply?

Mr. BERRY. No; sometimes I sent down, but there wasn't any more, they would say.

The CHAIRMAN. Did you ever go to the kitchen and ask for meat and not get any?

Mr. BERRY. No; I never went. I sent by the waiter, and he would come back and say there would be no more.

The CHAIRMAN. You told the waiter to go down and see if there was any more food?

Mr. BERRY. Yes.

The CHAIRMAN. And he came back and said there was not any more?

Mr. BERRY. Yes.

The CHAIRMAN. How often would that happen?

Mr. BERRY. Quite often.

The CHAIRMAN. How often?

Mr. BERRY. Once a week, probably.

The CHAIRMAN. Did you ever complain of that?

Mr. BERRY. Yes.

The CHAIRMAN. To whom?

Mr. BERRY. To the supervisors.

The CHAIRMAN. What supervisors?

Mr. BERRY. To Mr. Stoner, Mr. Estep, and Mr. Carter.

The CHAIRMAN. Do you remember the particular occasion of the complaint to these particular supervisors that you have mentioned?

Mr. BERRY. No; I didn't keep any date of them.

The CHAIRMAN. But you are confident that you complained to them at least once a week?

Mr. BERRY. Yes.

The CHAIRMAN. In regard to a shortage of food?

Mr. BERRY. Yes.

The CHAIRMAN. And you would not get any relief?

Mr. BERRY. No.

The CHAIRMAN. Did you ever talk to any doctor about it?

Mr. BERRY. No; not a one.

The CHAIRMAN. Where are you employed now?

Mr. BERRY. On the Capital Traction Railway.

The CHAIRMAN. What position have you?

Mr. BERRY. Motorman.

The CHAIRMAN. Did you ever see any patients badly treated there?

Mr. BERRY. I have seen them treated rough.

The CHAIRMAN. How rough? What do you mean?

Mr. BERRY. I only seen them treated rough in case of necessity where they would have to be treated so in case of self-defense.

The CHAIRMAN. You never saw them treated with unnecessary cruelty?

Mr. BERRY. No.

The CHAIRMAN. Did you ever see them toweled? Do you know what it means to towel a patient?

Mr. BERRY. Yes, I have seen them toweled, but only to subdue them when they couldn't manage them.

The CHAIRMAN. How do they towel patients?

Mr. BERRY. Put a towel around his neck and wring it.

The CHAIRMAN. Did you ever do that yourself?

Mr. BERRY. No, I never toweled them.

The CHAIRMAN. Why?

Mr. BERRY. Because I never had occasion to.

The CHAIRMAN. How did you subdue patients when they were fractious?

Mr. BERRY. I subdued them any way I could.

The CHAIRMAN. Did you ever hit patients?

Mr. BERRY. Yes, I have hit them.

The CHAIRMAN. Was that in accordance with the regulations?

Mr. BERRY. No, that was against regulations.

The CHAIRMAN. Why did you hit them?

Mr. BERRY. In self-defense.

The CHAIRMAN. Did that have anything to do with your discharge?

Mr. BERRY. No; I never abused a patient only when it was necessary, and I didn't have proper help to handle them otherwise.

The CHAIRMAN. Did you ever knock a patient down?

Mr. BERRY. I have knocked them down; yes.

The CHAIRMAN. What patient?

Mr. BERRY. John Caffrey.

The CHAIRMAN. What was he doing?

Mr. BERRY. He was unruly. He and I had a scrap, and I couldn't handle him without handling him rough. He was a big man and weighed about 230 pounds. He was too much of a man for me and I wasn't going to let him get the best of me.

The CHAIRMAN. And so you knocked him down?

Mr. BERRY. Yes.

The CHAIRMAN. Was any complaint ever made against you on account of that?

Mr. BERRY. No.

The CHAIRMAN. Did anybody know it except you?

Mr. BERRY. No.

The CHAIRMAN. When you did that you knew that you were disobeying the regulations, did you not?

Mr. BERRY. Well, yes, I suppose you are. They don't tell you to hit them.

The CHAIRMAN. In other words, you were told when you first went there that you must not strike the patients even in self-defense, were you not?

Mr. BERRY. I wasn't told anything about self-defense at all. I was told not to handle them rough. I was told not to do that.

The CHAIRMAN. How many times did you have scraps with patients of that kind?

Mr. BERRY. Not often.

The CHAIRMAN. How many times?

Mr. BERRY. I suppose probably once a month he would get unruly. He was about the worst patient we had on the ward.

The CHAIRMAN. And when he got fractious you would bat him over the head?

Mr. BERRY. I didn't hit him so I would bruise him.

The CHAIRMAN. You would have been found out if you had, I suppose?

Mr. BERRY. They couldn't find out who done it.

The CHAIRMAN. They could have made inquiries and got you into trouble, I suppose?

Mr. BERRY. Not necessarily. Lots of them were bruised, and it didn't get the attendant in trouble either.

Mr. HAY. How is that?

Mr. BERRY. I say some have been bruised, and the attendant wouldn't get in trouble about it. Maybe another patient would hit him. Very often the patients would fight among themselves.

The CHAIRMAN. How often did the doctors that had charge of your ward come in there?

Mr. BERRY. Every day.

The CHAIRMAN. Did you ever in making reports to them tell them in regard to the trouble you had had with patients?

Mr. BERRY. No.

The CHAIRMAN. Why not?

Mr. BERRY. I would tell them that a patient had got unruly. I didn't tell them I hit him or anything like that. I told them I had to handle him rough to control him.

The CHAIRMAN. Did you ever put these so-called camisoles or strait-jackets on them?

Mr. BERRY. No, we didn't have any on our side. At least, not on my ward we didn't.

The CHAIRMAN. How often did the board of visitors come to the asylum?

Mr. BERRY. I don't know how often they came there. I don't remember seeing them over once or twice. Probably they might have come oftener.

The CHAIRMAN. Did they come at regular times?

Mr. BERRY. Not as I know of.

The CHAIRMAN. Were you ever given any orders to fix them up for visitors' day?

Mr. BERRY. No, I never was. Our men was always out.

The CHAIRMAN. They went out every day?

Mr. BERRY. Yes, all but a few of them worked on the farm.

The CHAIRMAN. Did you ever hit patients when they were out with you?

Mr. BERRY. No.

The CHAIRMAN. How long have you been with the Traction company?

Mr. BERRY. I will be there two years this August.

The CHAIRMAN. Which of the companies is that?

Mr. BERRY. The Capital Traction.

Mr. HAY. Do you know of any other attendants that have injured patients?

Mr. BERRY. No, sir.

Mr. HAY. You do not?

Mr. BERRY. No.

Mr. HAY. You did not see any other attendant do it?

Mr. BERRY. No; I never seen any other attendants.

Mr. HAY. Do I understand you to say that the attendants can do that and conceal it?

Mr. BERRY. Yes; if they want to, of course. They don't have to tell everything they do. If they did there wouldn't be many of them in there, I don't guess. They wouldn't find men enough to run the institution if they told everything they did. Speaking of the grub there, the grub was very common. I have seen lots of times when I would go to the table and I wouldn't eat probably a mouthful for days. I couldn't eat the grub.

The CHAIRMAN. That is all.

Mr. BERRY. And turkey—we have never known the time before Dr. White came there when the patients didn't have turkey on Thanksgiving since I have been going to the institution.

The CHAIRMAN. Dr. White changed it from Thanksgiving to Christmas, did he not?

Mr. BERRY. Well, I don't think they have it on Christmas, either.

The CHAIRMAN. Were you there on Christmas?

Mr. BERRY. Yes; and we didn't have it on Christmas when I was there.

The CHAIRMAN. You did not have good food?

Mr. BERRY. No.

The CHAIRMAN. And the attendants' food was as bad as the patients'?

Mr. BERRY. Yes.

The CHAIRMAN. And sometimes worse?

Mr. BERRY. Yes.

The CHAIRMAN. You had a devil of a time there?

Mr. BERRY. That is what I did.

The CHAIRMAN. And naturally when they told you to clean brick in connection with your work as an attendant you said you would not do it?

Mr. BERRY. That is right.

The CHAIRMAN. And for that reason you were discharged from the asylum?

Mr. BERRY. Yes. You could hear the patients making remarks there during Thanksgiving, and they would say, "This place is not as good as a penitentiary or a jail. They do have turkey there on Thanksgiving."

The CHAIRMAN. Who talked to you in regard to giving this testimony?

Mr. BERRY. No one.

The CHAIRMAN. How did you happen to come here?

Mr. BERRY. I was summoned.

The CHAIRMAN. Who talked to you before you were summoned?

Mr. BERRY. No one talked to me, only the attendants over at the asylum, the ones I worked with.

The CHAIRMAN. Did not some one tell you they wanted to summon you to come and give testimony in this case?

Mr. BERRY. No.

The CHAIRMAN. Not a single individual?

Mr. BERRY. No.

The CHAIRMAN. How do you suppose the Sergeant-at-Arms found out who you were?

Mr. BERRY. I had a talk with Dr. Emmons.

The CHAIRMAN. Oh! When?

Mr. BERRY. It has been a right good while ago, a month or more ago—about a month ago, I think.

The CHAIRMAN. He told you that very likely some day you would be summoned to give testimony?

Mr. BERRY. Yes.

The CHAIRMAN. Did you tell him what you were going to say?

Mr. BERRY. No.

The CHAIRMAN. What did you tell him?

Mr. BERRY. I didn't tell him what I was going to say.

The CHAIRMAN. For instance, he came to you and asked you whether you would come if you were summoned?

Mr. BERRY. Dr. Emmons didn't come to me at all. I went to him.

The CHAIRMAN. When? How did you come to go to him?

Mr. BERRY. One of the attendants told me, that had been to work at the asylum, that he wanted to see me.

The CHAIRMAN. He brought a message from Dr. Emmons to you, for you to call on Dr. Emmons?

Mr. BERRY. He told me to go down to 1100 on the Avenue, that he wanted me to have a talk with Dr. Emmons.

The CHAIRMAN. Who was the attendant who told you this?

Mr. BERRY. I don't know the fellow's name now. I didn't know him very well then, only he knew where I worked at. He came on the car one day and told me. I worked on Relief 5 the whole time I was there, and my head attendant was away on a vacation for fifteen days, and I did two men's work on the ward myself, and looked out for 47 patients.

The CHAIRMAN. All alone?

Mr. BERRY. All alone, for fifteen days, and fed them and waited on them myself. You might know how the grub was dished up for them, for 47 men, when I had fifteen minutes to do it in, and one man.

The CHAIRMAN. During that time, during this fifteen days, they sent some one from another ward to assist you, did they not?

Mr. BERRY. No, sir; only at nights, when it would be my night off. We were off every other night.

The CHAIRMAN. There was a night attendant on the ward, was there not?

Mr. BERRY. A man stayed there at night, yes.

The CHAIRMAN. Is he not the one that you mean they sent on at nights when you were off?

Mr. BERRY. Yes.

The CHAIRMAN. There was somebody else besides one day attendant and one night attendant, was there not?

Mr. BERRY. There were two men on the ward, one man on one night and one off one night.

The CHAIRMAN. What do you mean by night? You never were there during the whole of the night, were you?

Mr. BERRY. Yes, sir; all day and all night.

The CHAIRMAN. What were your hours of work?

Mr. BERRY. I would go on, for instance, this morning at 6 o'clock, and be on there from 6 o'clock until to-morrow evening at 5 o'clock. That is about forty-five hours, isn't it? I would be off from 5 o'clock until 10, five hours out of forty-five I would be off.

The CHAIRMAN. On the first day when you started in at 6 o'clock were you not relieved at 8 o'clock?

Mr. BERRY. No, sir.

Mr. HAY. Could you not go to bed?

Mr. BERRY. I could go to bed after 8 o'clock.

The CHAIRMAN. You did not have anything to do with the care of the patients from 8 o'clock until the next morning at 6 o'clock, did you?

Mr. BERRY. No, unless they were making some disturbance, and then I would have to get out.

The CHAIRMAN. Did you sleep in the same ward with them?

Mr. BERRY. Yes; and lots of the time I looked out for two wards—the adjoining ward and mine, between 95 and 100 men—while the attendant was gone to supper. It is the same as a srail in a beehive with a lot of bees—one man among 95 or 100 crazy men.

Mr. HAY. How long would he be gone to supper?

Mr. BERRY. For an hour or so. Then again I would probably be bathing my men down in the bath. I have been down there, and I was supposed to be looking out for the two wards.

The CHAIRMAN. Did you ever complain to Dr. Hummer in regard to the tremendous amount of work you had to do?

Mr. BERRY. Yes, I have told him. When I was on the fifteen days I told him it was an awful lot of work for one man to do.

The CHAIRMAN. What did he say about that?

Mr. BERRY. He said he didn't have nobody to send over there. After I cleaned up this ward, then I took the men out and worked them on the grounds, after doing that. After doing two men's work on the ward I would do one man's work out on the grounds for the rest of the day.

Mr. SMYSER. So that in one day you did three men's work?

Mr. BERRY. Yes; considering the day's work outside, or half a day, rather. I would do two men's work on the ward. We was supposed to have the ward looking as nice with one man on it as it would with two.

Mr. SMYSER. Did you think that because you were discharged you might get even with the hospital as a witness?

Mr. BERRY. Get even with them? No, I never expect to get even with them.

Mr. SMYSER. You don't think you can even up?

Mr. BERRY. No, I never expect to. One thousand dollars wouldn't pay me back for the time I lost there.



Mr. HAY. Have you any feeling against the authorities at the hospital?

Mr. BERRY. Any ill-feeling?

Mr. HAY. Yes.

Mr. BERRY. No, I haven't, only I thought I was wrongfully discharged, and uncalled for. I think Dr. Hummer was kind of sorry himself, afterwards.

The CHAIRMAN. But notwithstanding that hard work you had to do, you wanted to stay there as an employee, did you?

Mr. BERRY. No, I can't say that I did want to stay there, but I didn't want to be discharged. I am mighty glad they did send me away from there since, for probably I would have been there yet.

Mr. HAY. You mean that you did not want the odium of being discharged?

Mr. BERRY. No, not for such an offense. If it had been something to be discharged for I wouldn't mind, but refusing to clean brick. Think of that, for a government institution.

The CHAIRMAN. They never said anything to you about striking patients, did they?

Mr. BERRY. No; I never treated patients rough, only when I had to do it, and I don't think other attendants did either. There is times when you have to handle them rough to hold them down, or they would take possession of the ward. When a lot of men like that take possession you can not treat them like babies. There are powerful men on the ward, and you have to treat them rough.

The CHAIRMAN. You never saw anybody ill use patients then unless it was absolutely necessary to protect the attendant?

Mr. BERRY. No.

#### TESTIMONY OF JOSEPH L. WATERS.

JOSEPH L. WATERS, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. Waters, you are at present an attendant at the St. Elizabeth's Asylum, are you?

Mr. WATERS. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. WATERS. It will be seven years next September, the 5th day.

The CHAIRMAN. What ward are you employed in?

Mr. WATERS. R Building, ward No. 2.

The CHAIRMAN. How many patients are there in that ward?

Mr. WATERS. Thirty-six.

The CHAIRMAN. And how many attendants, besides yourself?

Mr. WATERS. One nurse and one attendant—three with all.

The CHAIRMAN. What kind of patients are there?

Mr. WATERS. The patients are old men, most of them feeble.

The CHAIRMAN. Are they quiet?

Mr. WATERS. More or less so, sir; yes, sir.

The CHAIRMAN. Then, of course, besides you and this other attendant and nurse, there is a night attendant also?

Mr. WATERS. Yes; oh, yes.

The CHAIRMAN. Your hours are from 6 o'clock until 5 o'clock one day, and from 6 to 8 the next day, are they not?

Mr. WATERS. Yes, sir.

The CHAIRMAN. What pay do you get?

Mr. WATERS. Thirty dollars.

The CHAIRMAN. What have you got to say in regard to the food there?

Mr. WATERS. Well, sir, I think the food, as far as I know, sir, is very good—very good.

The CHAIRMAN. Do the patients and attendants get the same character of food?

Mr. WATERS. Yes; the attendants get a little better where I am.

The CHAIRMAN. Better?

Mr. WATERS. Yes, sir.

The CHAIRMAN. Do you know anything about any cruelty to patients there?

Mr. WATERS. No, sir; I do not.

The CHAIRMAN. You never saw any undue harshness by any of the attendants to patients?

Mr. WATERS. No, sir; I couldn't say that I did. I did some six years ago. At one time I saw an attendant slap a patient, but he was instantly discharged.

The CHAIRMAN. That was in Dr. Richardson's time.

Mr. WATERS. Yes.

The CHAIRMAN. How about bathing? Do you ever bathe patients?

Mr. WATERS. Yes, sir; all the patients in the day time.

The CHAIRMAN. What kind of a system do you have, shower baths?

Mr. WATERS. We have both shower baths and bath tubs. We put them in a tub and bathe them, and change the water for every patient.

The CHAIRMAN. You do?

Mr. WATERS. Yes, sir.

The CHAIRMAN. Did you ever know of a case where two patients have been bathed in the same water?

Mr. WATERS. No, sir.

The CHAIRMAN. Did anybody talk to you in regard to the character of the testimony you were going to give?

Mr. WATERS. No one whatever, sir.

The CHAIRMAN. Did you know you were going to appear until you got served with a subpoena?

Mr. WATERS. No, sir; I did not.

#### TESTIMONY OF MRS. OPHELIA BIGGS.

Mrs. OPHELIA BIGGS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you employed at St. Elizabeth's, now?

Mrs. BIGGS. No, sir; I am not.

The CHAIRMAN. When were you there?

Mrs. BIGGS. I was there from December 22, 1900, and I put in my resignation for the first day of May, 1904.

The CHAIRMAN. The first day of May, 1904. So you were there when Superintendent White was, for about six or seven months?

Mrs. BIGGS. Yes, sir.

The CHAIRMAN. You went in under Dr. Richardson?

Mrs. BIGGS. Yes, sir.

The CHAIRMAN. What department were you employed in?

Mrs. BIGGS. I was in the kitchen. I went from there to the general dining room, where the employees ate; and from that to the special dining room, where Mr. French and the bosses of the department ate. I was in that dining room about there years; maybe a little over three years.

The CHAIRMAN. What do you think, generally, about the food there at the asylum? If there was any difference in the food supply there between Dr. Richardson's time and Dr. White's time, we would like you to state it; but what we particularly want to know is after Dr. White went there as superintendent.

Mrs. BIGGS. When I first went from the employees' dining room to the special dining room they had the same food. It was all cooked the same and it was dished the same, with the exception that the meat was cut in one piece, and Mr. French carved at the second table and Mr. Green, the farm steward, at the first. But after I was there for a while there was a change made in the food. There was a dietitian there by the name of Mrs. —; it was the first dietitian, but I have forgotten the name.

The CHAIRMAN. Suggest a name.

Mr. SMYER. Jones?

Mrs. BIGGS. No.

The CHAIRMAN. Mezzani?

Mrs. BIGGS. No, that was not it.

The CHAIRMAN. Well, never mind the name.

Mrs. BIGGS. When she went Miss Walters took her place, and from that time out the special dining room had different food to what the general dining room had.

The CHAIRMAN. Who dined in the special dining room?

Mrs. BIGGS. Mr. French and his wife, and Mr. and Mrs. Harnish, Mrs. Barry and her two children, Mrs. O'Leary, Mrs. Posey from the laundry, Mr. De'trich, Mr. Maenche, and Mr. Green, and the building contractors from those new buildings, Mr. Burrough was his name, and two Mr. McNamaras, and Mr. White, from the florists.

The CHAIRMAN. Are most of those people there now, do you know?

Mrs. BIGGS. Well, Mr. French and Mr. Harnish are still there, I think.

The CHAIRMAN. When was this change made?

Mrs. BIGGS. In the fall after this first dietitian cook came there.

The CHAIRMAN. Was that under Dr. White?

Mrs. BIGGS. No, under Dr. Richardson.

The CHAIRMAN. The change was made when the dietitian came?

Mrs. BIGGS. It was made when the dietitian cook came there and it still continued up to the time I left, and I think—I can not say positively—it is just the same now as it was at that time.

The CHAIRMAN. As far as the attendants and patients are concerned they get the same food, do they not?

Mrs. BIGGS. No, sir.

The CHAIRMAN. They do not?

Mrs. BIGGS. It is different cooking and different dishing up and all.

The CHAIRMAN. Was that always so under Dr. Richardson?

Mrs. BIGGS. I couldn't tell you whether it was or not.

The CHAIRMAN. I mean during the time you were there?

Mrs. BIGGS. As far as I know it was.

Mr. HAY. It was the same food, I suppose, was it not?

Mrs. BIGGS. No, it was not the same food.

The CHAIRMAN. How did it differ? What was the difference?

Mrs. BIGGS. It differed in the way it was cooked and the class of cooking, and the fact that lots of the help that was employed in the kitchen cooked the attendants' food that knew nothing at all of cooking—those that scrubbed around and done things like that, that knew nothing of cooking whatever.

The CHAIRMAN. They cooked the attendants' food?

Mrs. BIGGS. Pretty much so. When I first went there I had to help cook it myself.

The CHAIRMAN. The patients' food, though, was cooked by people who did know about cooking?

Mrs. BIGGS. The patients'?

The CHAIRMAN. The food that went to the patients. Was that cooked by real cooks?

Mrs. BIGGS. Those that went to the sick wards and the pay wards did, but those that was on the other wards, why the help—the kitchen help—helped cook it.

The CHAIRMAN. What do you mean by "helped cook" it? Do you mean that they prepared the meat for cooking, or roasting, or boiling, or whatever was done with it?

Mrs. BIGGS. To a certain extent. They would get the fish ready, and wash it, and wash the potatoes and things of that kind, fry bread cakes for the n, etc.

The CHAIRMAN. Did they not know how to do it?

Mrs. BIGGS. I don't suppose they did. I have even seen colored patients allowed to mix the codfish cakes and things up with their hands to be sent out to patients on the ward, and the patients around the kitchen helped to mix up codfish cakes and everything.

The CHAIRMAN. How recently have you seen that?

Mrs. BIGGS. The last visit I was over there the patients were helping to mix up codfish cakes and meat cakes and things to send to the wards.

Mr. HAY. Were they not clean?

Mrs. BIGGS. I couldn't swear they were clean, indeed.

The CHAIRMAN. There are a good many colored cooks in all kinds of establishments that have to do that.

Mrs. BIGGS. I know that, too; but there is a lot of difference between an ordinary colored cook and a patient. The patients chew tobacco and spit around, and they rub their hands on their feet. I have seen them take off their shoes and stockings, off of both feet, and rub their hands on their feet and then get up and go to work and fix codfish cakes and things. I wouldn't eat one for a five-dollar bill. I have seen that done right in the kitchen.

Mr. HAY. Why did you leave there?

Mrs. BIGGS. I left there to get married. I put in my resignation fifteen days before I left. I put it in on the 15th of April and left the last day of April, on Saturday night.

Mr. HAY. Did you ever make any complaint about this?

Mrs. BIGGS. No, I have not made any complaint, any further than when they would be dishing up the meats or something when I was in the general dining room. I have spoke to Jim Sales about the meat, and Mr. French came along and both of them smelled it, and

Sales said it didn't smell quite good, and Mr. French told him to let it go in.

Mr. HAY. Who was Jim Sales?

Mrs. BIGGS. A cook in the kitchen there. He was the head cook when I first went there. Walter Crowley was head cook when I left there.

Mr. HAY. I mean to say, did you ever make any complaint of this while you were there?

Mrs. BIGGS. I hadn't made any complaint, any further than to mention at that time the meat, and Jim Sales called Mr. French and asked what he thought about it. They both smelled it, and I said it didn't smell very inviting, I didn't think, to take in to people to eat.

Mr. HAY. That was before it was cooked, I suppose?

Mrs. BIGGS. I don't know what the fault was—

Mr. HAY. No, I say that was before it was cooked?

Mrs. BIGGS. No, sir. It was when it was cooked, and was being dished to go in to the general dining room for the farm hands to eat for 12 o'clock dinner.

The CHAIRMAN. Where did you eat?

Mrs. BIGGS. I ate in the special dining room, when I ate there, after they all got through.

Mr. HAY. Where was the cooking for the special dining room done?

Mrs. BIGGS. It was done in the general kitchen by two special cooks, for the six front wards and the special dining room where the bosses ate. At that time Patsy Bundy and Eva Taylor, who is now married, done the cooking for that dining room.

Mr. HAY. What time are you speaking of?

Mrs. BIGGS. The time when I left there. I left the two of them there when I left.

The CHAIRMAN. Did they know how to cook—Eva Taylor and Patsy Bundy?

Mrs. BIGGS. They knew very well how to cook. Patsy Bundy was supposed to be a good cook, and Eva was her assistant, and knew a great deal of it when she came there, and she learned a great deal from working with Patsy Bundy. Dicy Bundy, I should have said. They were sisters, and I got them mixed.

Mr. HAY. Did they prepare food for the special dining room?

Mrs. BIGGS. Yes, sir; they prepared it and cooked it for that dining room, and the six front wards—what they call the first section.

Mr. HAY. What is your feeling toward the hospital?

Mrs. BIGGS. I have no hard feelings at all against the hospital, one way or the other; only that simply information was brought to me to-day to come up. I said I didn't care about coming, and they sent after me again to come up. They said you wanted me to come up, so I came up.

Mr. HAY. Who talked to you about your evidence in this case?

Mrs. BIGGS. Nobody has said anything to me at all about it. My husband brought the notice in to-day to me and told me I had to come up. I told him he could go, that I didn't care about coming.

#### TESTIMONY OF SIMM BIGGS.

SIMM BIGGS, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. Biggs, were you an attendant at the asylum?

Mr. BIGGS. No, sir; I was employed in the general kitchen.

The CHAIRMAN. Are you employed in St. Elizabeth's now?

Mr. BIGGS. No, sir.

The CHAIRMAN. When were you employed there?

Mr. BIGGS. I was employed there in 1903, the 27th of August, 1903.

The CHAIRMAN. When did you leave?

Mr. BIGGS. In 1904, the 1st of June.

The CHAIRMAN. How did you come to leave?

Mr. BIGGS. I gave them my notice, and left.

The CHAIRMAN. That is, you left voluntarily?

Mr. BIGGS. Yes, sir.

The CHAIRMAN. What were your duties at St. Elizabeth's?

Mr. BIGGS. I ran a car that carried the grub to the patients.

The CHAIRMAN. That is, through the passages there?

Mr. BIGGS. Yes, sir.

The CHAIRMAN. You took it from the general kitchen?

Mr. BIGGS. I took it from the general kitchen to the wards.

The CHAIRMAN. What were your hours of work?

Mr. BIGGS. I worked from 6 o'clock first when I went there—from 6 o'clock to 6 o'clock. I ran the first section car when I first went there. I got up at 6 o'clock and worked until 6. I had to get the dishes in. That was the pay ward—Cedar, Chestnut, and Cherry, and Walnut, Maple, and Poplar, the first six wards that I ran from. Then I went to Howard Hall, and from there Mr. French changed me to the Dawes buildings. I ran three cars when I was there, during the time I worked there.

The CHAIRMAN. How much pay did you get?

Mr. BIGGS. I got \$12 a month when I first went there.

The CHAIRMAN. And how much when you left?

Mr. BIGGS. Twenty dollars a month.

The CHAIRMAN. And you got your board there, too?

Mr. BIGGS. Yes.

The CHAIRMAN. Did you sleep in the asylum?

Mr. BIGGS. Yes, sir. I left the 1st of June and went back the 1st of July. I stayed around there a month, and then I left again, about the 5th or 6th of August, 1904.

The CHAIRMAN. What do you think about the food there?

Mr. BIGGS. The first section got nice food. I got the same food there that the bosses got, from the special dining room. That is where Mr. French and the bosses eat at.

The CHAIRMAN. What was the first section? Was that where the sick patients were?

Mr. BIGGS. No, the pay patients, I suppose. They got good food. I have seen them have fried oysters and all kinds of food like that. They got better than we got. I have seen them have ice cream on them wards.

The CHAIRMAN. Did you not ever get ice cream?

Mr. BIGGS. I never got it but once, and then I stole it. [Laughter.]

The CHAIRMAN. Did not the patients ever get ice cream, the general patients?

Mr. BIGGS. No, sir; no, sir; I never run ice cream to them. I never run no bananas or oranges to them the whole time I worked there.

The CHAIRMAN. Was the food, in your opinion, wholesome?

Mr. BIGGS. I don't think it was. Some of it wasn't.

The CHAIRMAN. It was the same food that they served to the general run of patients—the same food that they served to you?

Mr. BIGGS. No, sir.

The CHAIRMAN. Was it better?

Mr. BIGGS. Sometimes it was and sometimes it was not. I have gone in sometimes and set down at the table when I couldn't eat. I have got right good grub myself. I looked out for number one. I got the grub that Mr. French got and the bosses, and they told me that if I didn't stop eating it they would come and take me to Dr. White. I got it and taken it into the other dining-room. I told them to carry me to Dr. White, and when he discharged me I would stop eating good grub, but I was going to do it as long as I stayed there, and if there was any there I was going to eat it, and I did do it. [Laughter.]

The CHAIRMAN. So you took pretty good care of yourself there?

Mr. BIGGS. Yes, sir; I do that everywhere I go. If I don't nobody won't do it for me.

The CHAIRMAN. What are you doing now?

Mr. BIGGS. I am working at farming now at Camp Springs.

The CHAIRMAN. Are you working for yourself?

Mr. BIGGS. Yes, sir; I have got a small lot. It is no farm, but it belongs to me, and I didn't get it when I worked at the hospital, either. [Laughter.] Mr. French has made me do two men's work when I worked on the Dawes building. I was worked there for a month, and I thought I ought to get a day off, but when I asked him for a day off he refused to give it to me, and the only way I could get it was to go out at night and stay out. I have gone out and stayed out three or four days, and I wouldn't come back. When I came back he wanted to know where I had been, and I told him that I had been out. I just taken my time when I could get it.

Mr. SMYSER. You were a sort of a free lance up there?

Mr. BIGGS. I didn't care for the job at all. There wasn't pay enough for me to care for it.

Mr. SMYSER. You did sort of as you pleased out there?

Mr. BIGGS. I didn't do as I pleased altogether; no. They called me down once or twice. [Laughter.]

The CHAIRMAN. How did you come to come here? Who talked with you before you were served with a summons?

Mr. BIGGS. Mr. Pyles asked me if I would come. I never had no private talk with him or anyone at all. He just asked me would I come and I told him yes. I never had no private talk with him whatever.

Mr. HAY. Did you ever see any cruelty out there?

Mr. BIGGS. Yes, sir, I have. I have seen them on West Lodge second. I had it when I worked in the kitchen to come on West Lodge second to happen to a man that I wanted to help me scrub. I had to scrub. I wanted him to help me to scrub the tunnels down. I went there one morning and there was a colored patient there that I always thought right smart of, named Hopp. He was a sort of an untidy fellow, and he used to spit tobacco juice down the front of his shirt. The attendant told me to take him in and put a clean shirt on him. I got him and I took his shirt off, and while I was undressing him the attendant had taken a strap I suppose off from a strait-jacket or something and he struck the patient half a dozen times with the

strap with no shirt on. I put the shirt on the patient, and attendant never said nothing. He just walked out. His name Waltham. I don't know whether he is there now or not.

The CHAIRMAN. How long ago was that?

Mr. BIGGS. That was the first time I worked there, in 1903 or 19

The CHAIRMAN. Was Doctor Richardson superintendent then, Doctor White?

Mr. BIGGS. Doctor White was, sir.

The CHAIRMAN. Doctor White only went there the latter part 1903, you know?

Mr. BIGGS. Doctor Richardson was not there nor Dr. White either when Mr. French employed me.

The CHAIRMAN. You do not know who was superintendent?

Mr. BIGGS. Doctor White came after I went there.

The CHAIRMAN. Did you make any complaint about that?

Mr. BIGGS. No, sir; it was none of my business. I told the attendant it was not right to beat him like that.

The CHAIRMAN. Did it hurt him very much?

Mr. BIGGS. I wouldn't like to have it myself. I should think that would hurt me. I guess he had as much feeling as I did. Then I was at Garfield basement, running the Howard Hall car, and the Howard Hall attendants used to come to the basement and take the meals out of my car and carry them to Howard Hall second. I was there one morning—and I don't know the attendant's name, but he told the patient to take his coffee and the patient wouldn't do it, and I saw this fellow immediately strike him in the nose two or three times and the blood flew every time he struck him. Garfield basement was up on the floor and then right down below was the tunnel, and they carried the grub down to Howard Hall. I seen him hit the patient two or three times, and the blood came from his nose. The patient didn't do a thing, but he told the patient to take that can of coffee.

Mr. HAY. Is that attendant there now?

Mr. BIGGS. I don't know. I would know him if I seen him, but don't know his name. I used to wash the potatoes, too, when I was on the west side. I washed them for the east side and the west side sometimes. I had two men that worked with me while I worked on the west side. When I had time I would wash them tolerable good but if I didn't have time I just swept them—just rinsed them off. We cooked them with their jackets on. I have dumped as high as a barrel and a half in the sink at a time, and dumped the water and then took a skimmer and took them up and carried them upstairs.

Mr. SMYSER. You knew that was not right, did you not?

Mr. BIGGS. I don't know. I done it to get through.

Mr. SMYSER. Do you not know that when you were doing that kind of work you were doing what was absolutely wrong?

Mr. BIGGS. I seen it done by the rest.

Mr. SMYSER. I do not care what you saw anyone else do. Did you not know that you were doing something that was wrong?

Mr. BIGGS. I was doing the best I could, sir.

The CHAIRMAN. Why? Why could you not have done it better?

Mr. BIGGS. Because I didn't have time to do it better. I had a certain time to get them potatoes up there. When I had time I done it right, and when I didn't have time I couldn't do it right. We didn't have but two men on the west side to do the work, and we had to wash



the potatoes for the east side, too. We had more work than the east side men, and they had three, and the west side kitchen only had two. Part of the time I had time to do it, and when I had the time to do it I done it as it ought to be done. When I didn't have time I didn't do it right, and that is the reason I didn't do it. I didn't have the time. The potatoes were supposed to go on at a certain time, and if they didn't we lost the steamers, and the other cooks took them.

The CHAIRMAN. Whose fault was it?

Mr. BIGGS. I don't know whose fault that was. We had to scrub two days in the week. There was two scrubbing days, and we had to scrub. The days that we had the scrubbing to do we had the potatoes to wash, too. We had other work to do, just the same as if we didn't have no scrubbing to do.

The CHAIRMAN. When was it you say you left?

Mr. BIGGS. 1904, the 1st of June. Then I went back the 1st of July.

The CHAIRMAN. And you stayed there a month?

Mr. BIGGS. And I left there about the 7th of August.

The CHAIRMAN. Why did you leave the second time?

Mr. BIGGS. Because I got tired.

The CHAIRMAN. What did you go back for after you had such a devil of a time?

Mr. BIGGS. Because I didn't have nothing else to do. I was not farming then.

The CHAIRMAN. And so you drifted back?

Mr. BIGGS. Yes.

The CHAIRMAN. And you stayed there for a month and then you drifted out again?

Mr. BIGGS. A little over a month. Dr. White gave me a recommendation when I left, and if I was home I could bring it and show it to you; and Mr. French will tell you that I was as good a car man as they ever had in the kitchen, if he tells what is right. I was never behind time. If I was behind time with the meals it was the fault of the kitchen and not mine.

Mr. SMYSER. You are all right except about that one thing, that you didn't wash the potatoes good.

Mr. BIGGS. Well, I washed them good when I had the time, and when I didn't have the time I couldn't do it, and I wouldn't.

Mr. SMYSER. And may the Lord prosper you and your family.

Mr. BIGGS. I hope so. Is that enough?

Mr. SMYSER. Yes.

#### TESTIMONY OF F. BIGGS.

F. BIGGS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Biggs, were you employed at St. Elizabeth's?

Mr. BIGGS. Yes, sir.

The CHAIRMAN. What as?

Mr. BIGGS. I was there in the kitchen as a car man.

The CHAIRMAN. You mean that you pushed these cars?

Mr. BIGGS. Yes, sir.

The CHAIRMAN. Did you take food from the general kitchen to the several wards?

Mr. BIGGS. Yes, sir.

The CHAIRMAN. How long were you there?

Mr. BIGGS. I went there September 16, at night, and I went to work on the 17th of September, 1903, and came away June 27, 1904.

The CHAIRMAN. Did you resign?

Mr. BIGGS. Yes, sir.

The CHAIRMAN. Did you resign for the same reason that Mrs. Biggs resigned, to go and get married?

Mr. BIGGS. No, sir. I was smart enough to get married and stay there until I got ready to go away.

The CHAIRMAN. What are you doing now?

Mr. BIGGS. I am down on the market.

The CHAIRMAN. Where do you live?

Mr. BIGGS. I live here in Washington.

The CHAIRMAN. What do you do in the market?

Mr. BIGGS. I am a salesman.

The CHAIRMAN. What do you know about the food out at the asylum?

Mr. BIGGS. I couldn't tell you much more about it than my brother. Him an I was on the car and done the same work together. I know that the patients' food and the employees' food was something alike. I believe the employees' food may have been the least little bit better sometimes than the patients'. I know the bosses' food was nice, because I have had some of their oyster potpies. I stole them, and half a duck, and such. I have stole it at night, and I have taken it out in the daytime too. I used to go in the general dining room there, and I might have a cup of coffee, or something like that, and maybe eat a little bit; but my lady friend worked in the kitchen and she would get something good and put it on a plate and set it aside, and I would go in there and go behind the steamer and eat it.

Mr. SMYSER. Did you tell anybody that you were doing that, except your lady friend?

Mr. BIGGS. Certainly; they all seen me.

Mr. SMYSER. You thought it was a good joke, to have something a little better to eat than the rest?

Mr. BIGGS. I was wise to get it, wasn't I?

Mr. SMYSER. Yes; and you got it, too. You were wise enough to get it were you not?

Mr. BIGGS. Indeed I was.

(The committee, at 4:05 o'clock p. m., adjourned until to-morrow, Friday, June 8, 1906, at 10 o'clock a. m.)

HOUSE OF REPRESENTATIVES,  
*Washington, D. C., June 8, 1906.*

The committee met at 10 o'clock a. m.

Present: Mr. Olcott (chairman), Mr. Smyser, Mr. Barchfeld, Mr. Hay, and Mr. Wallace; also, Doctor White, Mr. Evans, Doctor Emmons, and others.

**TESTIMONY OF WILLIAM H. WILLIAMS.**

WILLIAM H. WILLIAMS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you live?

Mr. WILLIAMS. I live on Nichols avenue, in Anacostia.

The CHAIRMAN. Did you ever have anything to do with St. Elizabeth's asylum?

Mr. WILLIAMS. I drove there for ten years.

The CHAIRMAN. When did you leave there?

Mr. WILLIAMS. I left there on the 10th of May last, this May, 1906.

The CHAIRMAN. May, 1906.

Mr. WILLIAMS. Yes.

The CHAIRMAN. Did you leave voluntarily?

Mr. WILLIAMS. I resigned, sir.

The CHAIRMAN. What did you drive, there?

Mr. WILLIAMS. I generally drove the carriage, and I drove for the hospital in general—anything that I was called on for with the exception of working on the farm.

The CHAIRMAN. You drove the bus and carriages, etc.?

Mr. WILLIAMS. Yes, sir.

The CHAIRMAN. Did you drive the patients, too?

Mr. WILLIAMS. Yes, sir; when it was necessary to carry them back and forth to court, or something like that.

The CHAIRMAN. Did you live on the grounds?

Mr. WILLIAMS. No, sir; I lived outside. I lived with my family on the outside.

The CHAIRMAN. Did you eat your meals on the grounds?

Mr. WILLIAMS. Yes, sir; I taken my meals there.

The CHAIRMAN. How was the food there?

Mr. WILLIAMS. Well, the food was plenty of it. The only objection I had to it was in regard to the cooking of it. There was plenty of feed.

The CHAIRMAN. I suppose it varied, did it not? Sometimes it was better than it was at other times?

Mr. WILLIAMS. Well, sometimes it did.

Mr. HAY. You were employed all the time you were there in the stables?

Mr. WILLIAMS. Yes, sir; that was my duty. You will have to speak a little loud to me, because I am hard of hearing.

Mr. HAY. All right. What do you know about the stables?

Mr. WILLIAMS. In regard to the stables, I got along very well, with the exception of one man—a grievance I have got.

The CHAIRMAN. Was he a patient or a fellow employee?

Mr. WILLIAMS. No, sir; he was an employee by the name of Richard Moore.

Mr. HAY. Were the stables properly conducted? Did you have more horses than you ought to have had?

Mr. WILLIAMS. No, sir; sometimes we didn't have enough.

The CHAIRMAN. I have no more questions to ask.

Mr. HAY. Did you have any talk with anybody about this case before you came here?

Mr. WILLIAMS. Well, Doctor Edmonson—aint that his name?

Mr. HAY. Emmons?

Mr. WILLIAMS. Emmons, yes; he sent for me, he did, and he asked me a few questions, and I asked him if it was in regards to my case, and he says, no. So I dropped it right there and then.

Mr. HAY. What is your case?

Mr. WILLIAMS. Of course, it was just simply this man that I considered he intruded upon me—this man Mr. Moore.

The CHAIRMAN. That he did what?

Mr. WILLIAMS. Richard Moore, that he intruded on me.

The CHAIRMAN. Was Richard Moore a colored man?

Mr. WILLIAMS. Yes, sir.

The CHAIRMAN. Was he ahead of you in the stables?

Mr. WILLIAMS. No, sir; Mr. Dodge is supposed to be the boss, but this man Richard Moore has the whole say and everything else. He has been there some twenty-seven years.

The CHAIRMAN. You did not think that you were treated right there and you got out, Mr. Williams?

Mr. WILLIAMS. It was throwed up to me by this man on account of my being an old soldier for twenty-seven years that I should go to a soldiers' home and stay there.

Mr. HAY. You were in the Army, were you?

Mr. WILLIAMS. Twenty-seven years and a half.

The CHAIRMAN. How old are you?

Mr. WILLIAMS. I am 52 years old. I was born March 12, 1854.

The CHAIRMAN. You are a mighty young looking man for your age.

Mr. HAY. Were you discharged from the Army?

Mr. WILLIAMS. I was discharged from the Army for disability, sir.

Mr. HAY. Do you draw a pension?

Mr. WILLIAMS. Yes, sir.

Mr. HAY. I have no further questions.

#### TESTIMONY OF T. H. MEDLEY.

T. H. MEDLEY, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. Are you employed at St. Elizabeth's now, Mr. Medley?

Mr. MEDLEY. Yes, sir.

The CHAIRMAN. What is your position there?

Mr. MEDLEY. I am a nurse.

The CHAIRMAN. How long have you been connected with the hospital?

Mr. MEDLEY. Five years in April.

The CHAIRMAN. Have you been a nurse there all the time, or did you go as an attendant?

Mr. MEDLEY. No, sir; I went as an attendant and I went through the training school and then became a nurse.

The CHAIRMAN. What ward are you connected with?

Mr. MEDLEY. Allison D, second. It is a large ward there, inclosed with glass. You gentlemen were up there once.

The CHAIRMAN. What doctor has charge there?

Mr. MEDLEY. Doctor Hummer.

The CHAIRMAN. Is that where the tuberculosis patients are?

Mr. MEDLEY. No, sir; that is the C building. I am in the D building and the tuberculosis patients are in the C building, a smaller building attached to it.

The CHAIRMAN. You are at the place where the verandas are, with the glass windows, where it is inclosed with glass?

Mr. MEDLEY. Yes, sir.

The CHAIRMAN. What have you to say with regard to the care of patients over there?

Mr. MEDLEY. As far as the care of patients on my ward is concerned, I suppose about the only thing I could reasonably expect to tell about, I don't see anything that I have any right to complain about at all. We treat them as well as we can, and take as good care of them as we can, and when they are all there—there is four men of us on the ward and one lady; she is a nurse—when we are all there we have sufficient help to take care of them, but a great many times we have a shortage of help, and then it is a very great hardship on us to take care of them properly, and it is almost impossible to do it.

The CHAIRMAN. How many patients are there?

Mr. MEDLEY. We have 43, sir.

The CHAIRMAN. How many attendants?

Mr. MEDLEY. Four men and one lady. Our ward is supposed to be a hospital ward.

The CHAIRMAN. How many of the men are nurses? The woman is a nurse and you are a nurse?

Mr. MEDLEY. Yes.

The CHAIRMAN. And you have three attendants besides?

Mr. MEDLEY. Yes.

The CHAIRMAN. Are there any night people?

Mr. MEDLEY. The night people come on at 8 o'clock. We do not have anything to do with that part of it.

The CHAIRMAN. All the patients under your care are ill, are they not?

Mr. MEDLEY. Oh, no, sir; only a part of them. At this time we have not very many sick people there, what you would call really sick people. We have a good many in bed, and people who have to be fed by hand, with a spoon, like you would with children, but we have not any dangerously sick at this time; but we do have them at times, and we have a good many deaths on the ward.

The CHAIRMAN. You do not have disturbed patients?

Mr. MEDLEY. Sometimes we have. I have three patients on my ward now that are supposed to be suicidal patients, and they have to be continually watched. The orders from the physician are that they must never be allowed out of your sight, and there are times that it is almost impossible to obey that order. You can readily understand it. That day you were there our ward was all mixed up on account of the patients being in the house on account of our

porch being painted, and consequently you did not have an opportunity to see the location of our patients generally. We have 25 of them on that porch that is inclosed with this glass. Those patients are mostly patients who stay in bed. In fact, all of the patients who stay in bed all the time are kept out on that porch, and it becomes necessary that the attendants should go out on the porch and go around to the ends of it a good many times to wait on these patients. They have no knowledge, a great many of them, of waiting on themselves. They soil their beds, and you have to go around and clean the beds and clean them. It is absolutely necessary for us to go out on that porch and take care of people. Some of them can not stay in bed, and they will fall out of bed, and you have to look out for them.

The CHAIRMAN. Do you ever have to restrain any patients that you have charge of?

Mr. MEDLEY. Never, except by the doctor's orders, never since I have been there.

The CHAIRMAN. How often do you have the doctor's orders to do that?

Mr. MEDLEY. I have not had cause to restrain a man for sometime, except there is one man there now that gets out of bed, and for his own benefit it would be a good thing if he was restrained by some ordinary means.

The CHAIRMAN. Is he restrained in bed at all?

Mr. MEDLEY. No, sir; we do not have any restraints whatever. We are not using any restraints.

The CHAIRMAN. How is the food?

Mr. MEDLEY. Our food?

The CHAIRMAN. Yes.

Mr. MEDLEY. The food on our ward most of the time is very good. It is only occasionally that the food is not plenty good enough for any average man to eat.

The CHAIRMAN. Is it special diet?

Mr. MEDLEY. Special diet. Our kitchen is situated under our building there and we have special cooks to look after it. As a general thing it is very good. Sometimes they are short of help in the kitchen and it makes things work bad, but as a rule there is no ground for complaint about our food. Of course sometimes there is a shortage of feed, and on those occasions we either go to the kitchen ourselves and try to get it, or report it to the supervisor and he goes. Sometimes we get it and sometimes we can not get it. Then we simply have to use what we have.

The CHAIRMAN. Occurrences of that kind are not frequent, are they?

Mr. MEDLEY. Sometimes they are right frequent. I couldn't hardly say how frequent they are.

The CHAIRMAN. When was the last time you had a shortage of food?

Mr. MEDLEY. I don't think it has been more than a week ago. I think about a week ago we were short of meat at two meals to give the men and the matter was reported. There is a good many such things as that occur when we have to divide the food up and just make it go around. That is all we can do about it.

The CHAIRMAN. But generally speaking you have food enough?

Mr. MEDLEY. Generally speaking, as a general thing, in the hospital wards, they do not have much complaint, and the food is reasonably good. Our meats are fairly well cooked, and our vegetables are the same way. There have been occasions there when the coffee and tea was very poor, but by making a complaint about it we have had it corrected.

The CHAIRMAN. Do you have fruit?

Mr. MEDLEY. No, sir. We have dried peaches and prunes. Yes, we have been having some blackberries and strawberries during this season.

The CHAIRMAN. And you have grapes, do you not, in the grape season?

Mr. MEDLEY. Yes, sir. When the grape season comes in we have grapes, too, but as a general thing our fruits consist of dried peaches and dried apples and prunes, and things of that kind.

Mr. HAY. Mr. Medley, have you any complaint at all as to any portion of the institution? The hours, or anything of that sort?

Mr. MEDLEY. As to what?

Mr. HAY. As to the hours or anything of that kind?

Mr. MEDLEY. I don't suppose that any man who works in the place has not complained on that score. I would not hardly think so.

Mr. HAY. They all think the hours are too long, do they?

Mr. MEDLEY. Every man that I ever heard speak of it, all the employees, all the attendants, anyhow. You all have been told so much about these hours that it is hardly worth while for me to go over it, but there are some things that you have not been told about, and I think it no more than fair that I should tell you. In addition to these long hours—I am speaking of our hospital wards—we go on duty at 6 o'clock in the morning and go off one evening at 5 o'clock, and the other evening at 8 o'clock. Then we do not go on duty again until 6 o'clock the next morning, but in a large majority of the wards, I think, in our section, the men go on duty at 6 o'clock in the morning, and one half goes off at 5 o'clock that evening, and the balance stays on until 8, and then they retire to their room and stay there. They do not have an opportunity to go outside of the building at all. In those wards with the class of patients that are in them, I think a good many of them have to be taken to chapel service, and chapel service means, that is beginning at Thanksgiving and continuing on until the 1st of May, or sometimes up into May, there are two entertainments in each week, one on Tuesday and one on Friday. These men in those wards have to take the patients, and consequently in the evening one man is in the ward, and the one that is entitled to be off at 5 o'clock has to take the patients over. Consequently that time is lost to him entirely, and he has no privilege of going anywhere, but he can not spend his evenings in any other way. It certainly makes it very much harder on those people than on the others who have the privilege of going off sometimes. As to these men, particularly in the relief building, the rooms that they retire to after 8 o'clock are little bits of rooms, ten feet ten inches one way and ten feet the other, and two men sleep in them, with one window.

There is no ventilation in that room except through this window, and you can not open the door that leads to the hall or the transom to it, because it leads up to where the patients sleep, and the atmosphere is such out there that you would not want to inhale it. In that same

building, the relief building, the patients, to my knowledge, are very much more crowded than there is any occasion for or than they should be. There is more patients in the relief building to-day—that is, I won't say except on one ward that I know of, because I was in there—than there was before these new buildings were opened. At the time they commenced to move into these buildings I had charge of relief four. I had 40 men on it, and they moved in 10 extra men, and I said to the supervisor: "In the name of heavens I thought we were going to decrease the number of people here." He says: "This will only be temporary;" but it has continued up to this time. That ward to-day, I think, has 47. There are two wards together—relief one and relief four—connected together by a door, and they have 90 patients—that is, when the ward is filled. Occasionally there are vacancies on it, like there are throughout the hospital. That is an epileptic ward. Those two wards together are epileptic wards. There are four attendants on that ward and a nurse. He has been put in charge of the whole ninety men. It seems that was done at a time when the general idea seemed to be to decrease the expenses. When I was on relief four, I had charge of the ward, and consequently I got paid a man's charge. Since the two wards have been consolidated, there is only one man on the two wards, and therefore it deprives that man of the opportunity of having the benefit of what used to be a head man's pay.

Mr. HAY. Have you any eight-hour system out there at all?

Mr. MEDLEY. It seems to me they have it in the laundry, and I think on the farm and carpenters and men of that class. We have no eight-hour system with us.

Mr. HAY. Is the eight-hour system employed in the laundry and on the farm?

Mr. MEDLEY. The eight-hour system is employed there as far as I know. I have no reason to think it is not. I am sure the laundry only runs eight hours a day, and the mechanics out there and the carpenters and all that class of people, plumbers and electricians and all that class of people.

The CHAIRMAN. That is all, Mr. Medley.

Mr. MEDLEY. Just wait a few minutes. There are some other things there. One of them is in regard to the female nurses. Of course you have been told about their being locked out and about the trouble they have in getting their keys. It seems to me that is a very great injustice that these girls should be required to come in there when they have been out to spend the evening and have to go to the old center building and wait for the night doctor before they can get a key to go to their room. Many times they have to wait as much as an hour.

The CHAIRMAN. They do not have to wait an hour if they get in on time, do they?

Mr. MEDLEY. If they are assigned out until 12 o'clock, if they happen to come in at 12 o'clock, even then the doctor is not liable to be there. He is liable to be in other parts of the hospital, and it certainly seems to me, and I think to the majority of the people over there, that there is no occasion why they should be inconvenienced in that way.

Mr. SMYSER. You would not have those keys there so that they could go and help themselves when they got in, would you?



MR. MEDLEY. Yes, sir. It has been so. When I first went there, and for quite a while afterwards, the keys were left with the girl who had charge of the telephone. They were all hung up there on the door, and a person could come in and get a key, and register the name on the book at the time they came in and got the key, and then go along to the wards. It seems to me there is no reason why that could not be done now. The telephone office is still there now, and the girl stays there all night, and it would be the means of relieving the girls of this annoyance.

There is another point that you have not been told about, I think, and that is the duties of the night people, the night watches. They go on duty at 8 o'clock in the evening and they come off at 6. They work ten hours a day. Those people during the whole period of a year only have thirty days' absence. They have one night off, each Monday, and eighteen days annual leave, which makes thirty days.

In reference to those people, when I went there, and for quite a while afterwards, it was arranged that all these night people were allowed to go down to the main kitchen, where a dining room was provided for them, and get a midnight meal, which is really the best meal served to the employees in the hospital, well prepared and served right from the kitchen. Now, since the new arrangements have been made, the girls have been moved into the new buildings and they are not allowed to go down there. They have their lunch on their wards, and I have been told by some of them that it is extremely poor; and I have no doubt that there are plenty of them who would testify fully on that point if requested to do so. A majority of the men, or a good many of the men at least, still continue to go down to the kitchen, but these women do not have any opportunity to do it.

The food in the dining room where I eat, at many times, is as poor as anybody could wish to see it. I wish you had come in there last Sunday, and I would have liked to show you the meat that was put on that table for us to eat. It was some kind of roast meat, I suppose. It was just as common as it could be, and dried to a chip. It is just the same occurrence time and time again. We do not have any meat served in our dining room that is really palatable meat for people to eat. Our beefsteak is cooked until there is not a particle of substance in it, and there is no occasion for it, and no reason why it should be done. I went to one of the head dieticians there at one time—she is not there now—and I asked the question why our meats could not be better served, and she says, "It is not the service; the meats are common. We can not make good beefsteak out of common meat." That was her reply to me. The class of patients that eat in that large dining hall, they get this stuff. This meat and stuff that we do not eat is carried up there for those patients to eat. We have one dish, and it seems that it is the very frequent occurrence to have it. It is some kind of a stew, made up of scraps of one kind and another, and served in little pans. Time and again the attendants do not even touch it. They do not even break the crust on top of it, they have become so tired of eating that food.

That food is taken from our dining room and is fed to the patients afterwards. It certainly looks to me like there is no reason why, under the administration of this government, such things could not be improved. I do not pretend to tell you that it is any worse now than it used to be. I do not pretend to make any charge of that

kind at all, but I simply tell you the condition as I find it there, and as it really exists.

The CHAIRMAN. How long did you say you have been in the hospital?

Mr. MEDLEY. Five years. There is one point that I want to tell you about, and that is the increased duties that have been put upon the employees there. You have been told here that there are as many employees there now as there was three or four years ago. I have no hesitancy in saying that the records will show there are a great many less attendants and nurses. There may be as many employees, you know. The pay roll may be as great, but I know of my own knowledge that we have made a calculation, and instead of there being about 300 there is less than 260 actual men and women who attend to the patients.

Since this investigation has been begun, in the female departments, they used domestics to wash the dishes and look after the attendants, rooms, etc., and those domestics have been ordered into the wards to assist the nurses and attendants in their duties. That has never been done before; and by that means, it seems to me, there was an admission that there was a shortage of help there. The duties of the girls are certainly very much more now than they were before they moved into the new buildings.

The CHAIRMAN. Why do they all stay so long in the hospital?

Mr. MEDLEY. I suppose, like other poor people, they have to make a living somehow. The majority of men are poor uneducated people. They can not take an examination to get a civil service position. That is clearly evident from the fact that there was a little preliminary examination made there last fall. Dr. White had it established for admission to the training school, and I have no idea how many did not fail on that little examination. They are not in a condition to get other places and to get better services.

The CHAIRMAN. Most of them could get positions as domestic servants, could they not?

Mr. MEDLEY. I suppose they could.

The CHAIRMAN. Do you not think that they would get about as good pay in that way as they do at the hospital?

Mr. MEDLEY. As domestics?

The CHAIRMAN. Yes.

Mr. MEDLEY. I do not know, sir. I have not had occasion to look into that. I don't suppose so, though. Still, I don't know.

Mr. SMYSER. Do not the young women go there in preference to doing domestic work?

Mr. MEDLEY. Of course, I have no doubt they do.

Mr. SMYSER. Why?

Mr. MEDLEY. I suppose most anybody would rather do that work than to be a cook. I suppose so. I never heard them say so, but I suppose so. I guess they get more money than they would by being a cook, unless they became an expert, and the average woman don't have the opportunity to become an expert cook.

Mr. SMYSER. So that as compared with like duties, or duties requiring the same hours elsewhere, they prefer to be at the hospital. Is that it?

Mr. MEDLEY. I suppose so; otherwise they would not stay there. I suppose so.

Mr. HAY. Do you know anything about the soldiers who occupy the place that is called the bull pen?

Mr. MEDLEY. The bull pen?

Mr. HAY. Yes, sir.

Mr. MEDLEY. Of course. That is where I work.

Mr. HAY. You work there?

Mr. MEDLEY. I work right in the bull pen, and I don't see any reason anybody ever had for calling that place a bull pen. I think that is about as great a misnomer as could be possibly applied to it. It is a nice large lot there, inclosed with a fence, with nice shade trees in it, and running water, and there is everything there, in so far as that lot is concerned, that would have a tendency to be a comfort and pleasure to these old men who are turned loose in there. I don't see that anybody has any reason to talk about that bull pen. There is no place in the hospital, in my judgment, that is as nicely fitted up for those people to stay in. I think some old patient there started to call the place a bull pen—that fellow that hung himself the other night. He used to take great pride in calling it a bull pen. There was a fellow there, a man by the name of Waters, was the first man who christened it. He is running on with a lot of nonsense all the time. I don't think anybody has a right to find fault in that line.

Mr. SMYSER. Is he one of your patients?

Mr. MEDLEY. No, sir; he is not now. He has been.

Mr. SMYSER. How long was he?

Mr. MEDLEY. How long was he one of my patients?

Mr. SMYSER. Yes.

Mr. MEDLEY. I think I was on that relief for about a year, and he was in there all the time.

Mr. SMYSER. Did he have nothing to eat but water all that time?

Mr. MEDLEY. Nothing but what, sir?

Mr. SMYSER. Nothing but water?

Mr. MEDLEY. What for; food?

Mr. SMYSER. Yes.

The CHAIRMAN. That is what he told us.

Mr. MEDLEY. Waters was a man who paid board there—

Mr. SMYSER. No; that is not what I am asking you. Did he have nothing but water to eat all that time?

Mr. MEDLEY. He went to the dining room in Allison B building, in the hospital ward, where he had a tray served to him.

Mr. SMYSER. Did he eat something else besides water?

Mr. MEDLEY. I didn't see him eat. He didn't eat on my ward; but as for a man living on water—there are not many of them that live on water. Of course Waters would tell you so. He says he never has any clothes, except when some man dies, and he gets his old clothes. He will tell you anything; but he does it to run on with a lot of nonsense, to have something to say to everybody.

The CHAIRMAN. I guess that is all.

Mr. WALLACE. Let me ask one question.

The CHAIRMAN. Certainly.

Mr. WALLACE. Do the epileptics eat over there?

Mr. MEDLEY. Yes, sir; the epileptics, those who are confined in the reliefs one and four, they all eat in the large dining hall, or most of them. I have two epileptics on my ward. There is one thing that I would like to tell you, that I have omitted. I think there is many

times when there is not proper justice done to the attendants there in protecting them from the ill treatment of some of these patients.

Mr. SMYSER. What is that?

Mr. MEDLEY. I think there are many times when there is no proper protection given to the attendants; that they are left in the care of large numbers of patients, one man alone, when his life is in danger many times. He is in danger of being hurt. There is a fellow that came here right on the stand and testified, a man named Donohue, who just a short time before that had been knocked down by a big colored man on the ward, and but for the assistance of another colored man there is no telling how bad he might have been hurt. He was knocked flat on the floor and he couldn't get up. This man had a knife at the same time, and if the other colored man had not been there there is no telling what might have happened. I have seen that time and time again attendants get knocked down in the same way. There is a fellow named Klugg who testified here the other day. He told me he got his nose broke by being left on the ward with sixty-two men by himself.

Mr. SMYSER. What do you think ought to be done with patients who treat attendants in that way?

Mr. MEDLEY. I think it is just as fair that they ought to be properly taken care of as if they would make an assault on a physician.

Mr. SMYSER. How?

Mr. MEDLEY. They should be put in a ward where they can be held down. Just a few days ago, in the ward where Dr. Logie had charge, a patient made an assault on him, and he was sent to Howard Hall and locked up. They are never sent any place for an assault on an attendant. I think they may be sent to a ward and locked up there for a few days; but it seems to be generally understood that attendants are to be knocked and cuffed around as much as they please.

The CHAIRMAN. The instructions are that the attendants must take it without hitting back?

Mr. MEDLEY. I do not believe there is a single man in the place who would tell an attendant to stand and be beat up. They do say that you must treat them as humanely as you can, and I believe the men do it. I do not believe there is a supervisor in the hospital who would tell an attendant to stand and be beat up by a patient.

The CHAIRMAN. But you must not hit him back. You must try to restrain him in a proper manner?

Mr. MEDLEY. If you can.

The CHAIRMAN. But you must not hit him?

Mr. MEDLEY. I would not say that.

The CHAIRMAN. You think there ought to be more mechanical restraint and more people locked up, and more severity used toward the patients when they do not behave themselves?

Mr. MEDLEY. I think that patients who make assaults upon attendants should be restrained just the same as when they make assaults upon other people.

Mr. SMYSER. You think it would be of advantage to the patients and to the institution in general?

Mr. MEDLEY. Yes; it would be to the advantage of the patients, to show them that they must behave themselves. When a man is locked up he will soon realize that he must behave himself to get his liberty again, and it will last him a long time.

Mr. SMYSER. What do you say about these charges of cruel treatment of patients out there by attendants?

Mr. MEDLEY. As far as my own personal knowledge goes, there has been only a few. There are cases, of course, and men have been discharged a number of times. There have been such cases, there is no doubt, and it would be reasonable to presume that if these cases occur where they are detected, there might be cases where they are not detected.

I know of one case where a man was seen to kick a patient right in the stomach. The supervisor was standing looking right at him, but he didn't know it. He got discharged right away, of course he did. In every other case while I have been there, where there was brutality, the man was discharged, and in some cases there has been some attempt to prosecute them according to law, but it has seemed like they failed in that. I do not think for a moment that any of the officials of the institution would countenance any ill treatment of patients, but I do believe that if they would let the attendants make the patients understand that they must behave themselves, and that if they did not do it they could be restrained and locked up for awhile, it would be of great benefit to them. A few days ago a man was struck there without any provocation at all, and the man was locked up for only a few days and he has had his parole ever since. Ever since he has been going around there loose.

There is one thing that I think there has been an error about here, and that is in reference to the time that we get. You have been told, as I understand, and I think the paper probably quoted Dr. Clark correctly in saying it, that notwithstanding the fact that an attendant was sick and lost his vacation—the fifteen days vacation that he gets—he could still have a vacation. I know two men now—one works where I work and another one works in another department. The first one told me that he had been notified by the supervisor that eight days of his vacation are gone, and another one has been notified that fourteen days of his vacation were gone, on account of sickness.

Mr. SMYSER. Suppose that instead of giving it to us in this way, you give us the names.

Mr. MEDLEY. The first man's name is H. Groves. He is the man that told me he had been notified that eight days were gone.

Mr. SMYSER. Just tell us their names, and we will find out what they say.

Mr. MEDLEY. The other man is named Cusick. I don't know his first name. He told me that he had been notified by the supervisor that fourteen days of his vacation were gone.

The CHAIRMAN. Are they both there now?

Mr. MEDLEY. Yes, sir; they are both there yet. Of course, you gentlemen have gone over this thing about the time we work. We do not feel that we are getting the time that we are entitled to by law. We feel, on the advice that has been given us by Mr. Siddons, who testified here, that there is time we are entitled to now by the statutes on the books that we do not get—that is, fifty-two Sundays, seven holidays, and thirty days vacation, exclusive, without regard to sick leave at all.

The CHAIRMAN. Fifty-two Sundays?

Mr. MEDLEY. Fifty-two Sundays and seven holidays and thirty days vacation.

Mr. SMYSER. Do you claim fifty-two Sundays if there are only fifty-one Sundays in the year?

Mr. MEDLEY. Don't we generally have fifty-two Sundays in a year?

Mr. SMYSER. Not always.

Mr. MEDLEY. Then we could only get fifty-one. I never thought it out that there were only fifty-one Sundays.

The CHAIRMAN. Do you think that the attendants in the hospital or in any institution of that kind, ought to have fifty-two Sundays seven holidays, and thirty days vacation?

Mr. MEDLEY. I think it is reasonable, sir, especially considering the hours we work.

The CHAIRMAN. And then not have to deduct anything for sick leave?

Mr. MEDLEY. As far as the sick leave is concerned, I don't know. I never have bothered myself very much about the sick leave, but these other things I think we are entitled to.

Mr. HAY. You think you are entitled to the same leave or the same time that other Government employees are?

Mr. MEDLEY. As to the number of days, certainly, as far as the number of days is concerned.

Mr. HAY. The Department clerks are entitled to fifty-two Sunday and seven holidays and thirty days' leave?

Mr. MEDLEY. Yes, sir.

Mr. HAY. And you think you are entitled to the same thing?

Mr. MEDLEY. I think so; and my reason for saying that I think we are entitled to the holidays, outside of the fact that we have been so advised by Mr. Siddons, Dr. White admitted to us—he said that he conceded the fact that we were entitled to seven holidays and that he would give it to us. That was, I think, in the latter part of March that we had the talk with him about the holiday business. There upon we filed a petition with the board of visitors on the 2d day of April, setting forth these facts, covering the law as Mr. Siddons construed it, and we filed that petition with them, asking a consideration of this matter.

Mr. SMYSER. I want to put a question to you. Fifty-two Sunday thirty days' leave, and seven holidays make eighty-nine days.

Mr. MEDLEY. Yes, sir.

Mr. SMYSER. That is practically one-fourth of the time, is it not?

Mr. MEDLEY. I don't know. I haven't figured it out. I guess it is.

Mr. SMYSER. That is one day short of ninety, you see.

Mr. MEDLEY. Yes, sir. Practically it is in round numbers.

Mr. SMYSER. It is practically one-fourth. Then if you have thirty days' sick leave that would make one hundred and nineteen days which would be practically one-third of the time, that you think honestly and candidly these people over there are entitled to as a holiday or vacation, and yet you ought to be paid regularly. Is that it?

Mr. MEDLEY. I would not have said that, about—

Mr. SMYSER. I am asking you if that is it?

Mr. MEDLEY. No, sir; that is not it.

Mr. SMYSER. Would not the days figure out as I have said? Fifty-two and thirty and seven would be eighty-nine.

Mr. MEDLEY. I am not making any contention about the sick leave. I don't know anything about it.

Mr. SMYSER. Eliminating that and taking the fifty-two Sundays, the thirty days' leave, and seven days' holidays they make eighty-nine days, which is practically a fourth of the year?

Mr. MEDLEY. Yes, sir.

Mr. SMYSER. And it is conceded that if you get sick you are entitled to thirty days' sick leave?

Mr. MEDLEY. I don't know how it is conceded.

Mr. SMYSER. Eliminate that, then, and put it the other way. It is your idea that these people who are employed over there ought to have one-fourth of the time of the year and have the pay go right on. Is that it?

Mr. MEDLEY. Well, of course a fourth of a year is practically approximately the exact number of days. I think they ought to have eighty-nine days. That is the time.

Mr. SMYSER. Eighty-nine out of three hundred and sixty-five?

Mr. MEDLEY. ————— so should we have it in consequence of the hours we have to work than in any other department, and the trying duties we have to perform. With a man shut up in that place for fourteen consecutive hours amongst a lot of crazy people, some of them howling and some hollering and cursing and others singing or praying and that sort of thing going on all at one time, it is very natural that he should have some time.

The CHAIRMAN. Why, in the name of Heaven, do you, a man and a trained nurse, who has got a diploma as a trained nurse, stay in such a devil of a place?

Mr. MEDLEY. As far as my diploma as a trained nurse there is concerned it does not fit me for any place outside.

Mr. SMYSER. It only fits you to nurse there? Is that it?

Mr. MEDLEY. Assuredly. I could not go out and put myself up as a trained nurse and compete with people who have been educated as trained nurses. Those people take a course, I think, of about four years, and they have a great deal of actual experience, and they learn these things.

The CHAIRMAN. You have experience enough, don't you?

Mr. MEDLEY. No, sir.

Mr. SMYSER. Do you not know that in all such hospitals they have just such training schools as you have here, in Ohio, Pennsylvania, and New York?

Mr. MEDLEY. I don't know, but I suppose they have. But people coming from other hospitals to our hospital are not recognized as nurses until they take a part of our course. They are not nurses in our hospital.

Mr. SMYSER. Is this your idea, that your training out there simply fits you for nursing of a particular character?

Mr. MEDLEY. That is it exactly. That is exactly what I think about it.

Mr. SMYSER. And not for nursing generally?

Mr. MEDLEY. I would not be capable of going out and competing with nurses that are trained to wait on——

Mr. SMYSER. Blood poisoning and "sich"?

Mr. MEDLEY. The class of people they have to wait on.

The CHAIRMAN. As a matter of fact quite a number of nurses leave St. Elizabeth's and get positions in other places, in private institutions and public institutions?

Mr. MEDLEY. I could not answer that to save my life. I have no idea. I have heard of some of them going out and taking up some work as private nurses, and I have heard of them making a very poor thing of it.

The CHAIRMAN. Whom have you heard of going out and taking a place as a nurse and making a very poor thing of it?

Mr. MEDLEY. One lady left there, by the name of Miss Noeve, and I have heard that she has been drifting around from one place to another ever since. Still, I don't know. I have not kept up with the people at all as far as that is concerned—people leaving there to go and nurse.

Mr. SMYSER. Naturally she would not stay at one place a very long time, unless it was some chronic old man or woman, or something of that kind. Naturally she would go from one place to another.

Mr. MEDLEY. No; certainly not.

#### TESTIMONY OF JAMES W. BURROUGHS.

JAMES W. BURROUGHS, who had been heretofore sworn, was examined and testified as follows:

Mr. HAY. Mr. Burroughs, when you were here before did you tell everything you knew about this matter.

Mr. BURROUGHS. Only about the beating of patients, and the drunkenness of the foreman of the laundry, I think.

Mr. HAY. Have you ever had any experience in the meat business?

Mr. BURROUGHS. Yes, sir; for a number of years. I have been employed, all through the Spanish-American war, by the Eastman Company, Limited, of the United States and Europe; I have been employed by the Cudahy Packing Company, by Swift and Company, by Armour and Company—by all of them but the Nelson-Morris Company and the Hammond Company. I refused a position with the Nelson-Morris Company at the time when Mr. Connor, who is now general manager in Chicago of the Armour Company, took charge of their slaughter house at the foot of Sixth street in Jersey City. I have looked after all the shipping, and saw that everything was charged up correctly, and have done the whole business.

Mr. HAY. Do you know anything about the handling of meats at St. Elizabeth's?

Mr. BURROUGHS. Well, all the meat I ever saw, especially the corned beef, the majority of it was rotten.

Mr. HAY. I want to know whether you know anything about the handling of it.

Mr. BURROUGHS. What do you mean; the cooking, or what?

Mr. HAY. I mean as to whether it was inspected or not.

Mr. BURROUGHS. Out there.

Mr. HAY. Yes.

Mr. BURROUGHS. Not by anybody that was capable of knowing.

Mr. HAY. Were you present at any time when the inspection was made?

Mr. BURROUGHS. Yes, sir. Our breakfast was generally sent there at a quarter of seven, and I used to get up at half past five, and lots



of times I would be around where the meat was received. And then again, I would go at about a quarter after twelve and stay until a quarter of one, until dinner was ready. I was acquainted around there, and I used to go over there and overlook the meat, and pass comments on it.

Mr. HAY. Did you ever make any complaint to the supervisor or the Superintendent, or anybody?

Mr. BURROUGHS. I have spoke to Mr. French there. We have been talking together, and the butcher, Mr. Sutherland, I think, is his name.

Mr. HAY. What did you say to him?

Mr. BURROUGHS. I just simply said that it was not fit to serve, and I have come out of the dining room, especially in the sausage case, and have gone to the cook and complained about its condition. Generally they get the sausage there Friday evenings and Saturday mornings, I think, and kept it in the barrel until the following Monday morning before it was served. With green sausage, I don't care how fresh it is, if you put in a barrel and let it stay over night and a day it will heat and will not be fit to use. This sausage was kept until the following Monday and served, and lots of times they were tainted, and the people couldn't eat them.

I will say, about the beef, that the great complaint of the meat being poor, the general cause of that is that the cattle they use are entirely too light and lean. Beef to be the best has got to be covered with a certain amount of fat. If they used cattle ranging from 650 to 800 pounds they would find a marked improvement in the meat, but the cattle they have been using has ranged as low as 450 and is nothing but lean and gristle.

Mr. SMYSER. How do you know that?

Mr. BURROUGHS. I have seen it.

Mr. SMYSER. Do you not know what the contract that was executed by the Secretary of the Interior provides for?

Mr. BURROUGHS. I do not know a thing about what the contract calls for.

Mr. SMYSER. Have you weighed any of the carcasses?

Mr. BURROUGHS. Yes, sir; I have seen them weighed.

Mr. SMYSER. Where?

Mr. BURROUGHS. At St. Elizabeth's. They were marked.

Mr. SMYSER. When?

Mr. BURROUGHS. In the last two years.

Mr. SMYSER. Who marked them?

Mr. BURROUGHS. They are marked at the shipping department wherever they are slaughtered, on the inside, on the rib they are marked. The weights of all the cattle that are shipped for the market—that is, shipped from the slaughter houses—are marked on the inside with indelible ink—the weight of the bullock.

The CHAIRMAN. Have you seen them marked less than 600 pounds?

Mr. BURROUGHS. Yes. I have seen them come in when the bullock was less than 500 pounds—450 odd, practically.

The CHAIRMAN. Was that used, or was it sent back?

Mr. BURROUGHS. No, sir; it was used, and only in rare cases did the bullock weigh as high as 600 pounds. But a bullock, to be of good quality, should range from 600—no lower than 600—to 800 pounds. The larger it is the better will be the quantity of the meat, as a general thing. Take the Hereford, the Angus, and the Galloway. They are

supposed to be the best sort of cattle for butchering. They have a round barrel, short legs, and short neck, as a general thing.

The CHAIRMAN. Do you not think that Mr. French is a competent inspector?

Mr. BURROUGHS. No, sir; I do not. He does the best he can, but I am sure he is not a competent judge.

The CHAIRMAN. He can weigh a carcass, can he not?

Mr. BURROUGHS. Certainly, there is no doubt of that, but as a judge of meat he does not know. It is simply because of not knowing.

The CHAIRMAN. You think you could fill his job much better than he can?

Mr. BURROUGHS. As far as the judging of meat and the quality is concerned, I have not the least doubt of it. I have had experience with it.

Mr. SMYSER. There is one question that I wish you would answer for me.

Mr. BURROUGHS. Yes, sir.

Mr. SMYSER. It is in evidence here that their meat contract is made by competitive bidding; that there are specifications, and that the specifications call for carcasses of not less than six hundred and fifty pounds, and up to eight or nine hundred pounds—I have forgotten which, but it has an upward tendency—and that that contract is entered into by the Secretary of the Interior. Now, in the face of all that, can you tell us how it happens that year in and year out they are taking in carcasses over there that weigh 450 pounds, if that is true?

Mr. BURROUGHS. If that contract calls for that, they are violating it. They are not living up to it. If the contract calls for cattle ranging over six hundred pounds, they have violated the contract.

Mr. HAY. Could you tell whether meat had been preserved by these preservatives that they use?

Mr. BURROUGHS. I could not say positively, but in general cases, and in the corn beef cases especially, the meat they generally use for corning is that that is called return meat—meat that has been hauled around the city to the butchers, and they have refused it, and perhaps two or three times they would ship it to other butchers, and they would return the meat—

Mr. HAY. That is not what I mean. What I want to know is whether you or anybody else who is not an expert can tell by looking at beef, or examining it, whether or not preservatives have been used in order to preserve it.

Mr. BURROUGHS. Not after saltpeter is used, but before it is used you can. As a general practice in curing bad meat, this meat is laid down in a solution of preservaline. It draws all the foul smell and greenness from it. Then they skim that off and then they use a great deal of saltpeter. That preservaline whitens this beef, and the saltpeter hardens it, and brings it back to the beef color, a reddish color.

Mr. HAY. Is that practiced generally in these packing houses?

Mr. BURROUGHS. Yes, sir. There might be an exception with the small butchers, where they have a select trade, but I mean in the large packing houses, as a general thing.

The CHAIRMAN. The corned beef that they get at St. Elizabeth's does not come from the large packing houses, does it?

Mr. BURROUGHS. That does not help the case at all.

The CHAIRMAN. I know it does not, but I am simply stating that as a fact, that it comes from Virginia.

Mr. BURROUGHS. I did not know that there was any packing houses in Virginia—that is, firms.

The CHAIRMAN. I did not say anything about packing houses. I said that the corned beef comes from Virginia, and the cattle are slaughtered there, and pickled there.

Mr. BURROUGHS. There is very little cattle slaughtered in Virginia.

Mr. SMYSER. Has it occurred to you that if that is true, that it comes from Virginia, that you have gotten the wrong pig by the ear?

Mr. BURROUGHS. What is that?

Mr. SMYSER. I say has it occurred to you that if that is the fact, you have, in your testimony, gotten the wrong pig by the ear?

Mr. BURROUGHS. The wrong what by the ear?

Mr. SMYSER. The wrong pig by the ear. I see that you are not familiar with that expression. In other words, that you are on the wrong track.

Mr. BURROUGHS. No, sir; I am not on the wrong track.

Mr. SMYSER. Do you know where they get their corned beef from.

Mr. BURROUGHS. I think I know where they get it from; yes.

Mr. SMYSER. Where?

Mr. BURROUGHS. They have been getting it from Golden & Co.

Mr. SMYSER. And where do they get it?

Mr. BURROUGHS. I have not the slightest idea where they get it, but I know that two-thirds of the time it has been in a rotten condition and unfit, and after it has been cooked I have called the cook's attention to it, when he was taking it out of the boiler and slicing it up, that it was rotten and unfit to serve, and they said, "What can we do about it?" People have gone out of the dining room when it was served, and complained about it. It is a case if you don't eat that you go without. There is a little store over there kept by a patient, and if it was not for this little store lots of the people would go hungry. They spend a fourth of their salary, lots of them, to keep from starving. There was a young man there only three weeks ago, in the laundry, who went to the head of the department and said: "I can not live on this food and do my work. I am going to resign because I am not able to work on this food."

The CHAIRMAN. Why did you leave the hospital?

Mr. BURROUGHS. I left on account of my heart trouble, but I found out for the first time, when Mr. Quaid was on the stand, that there was a charge against me. Up to that time I did not know of any such charge, because I got permission to go out on the 26th of March. I was in the hospital every day. On the 17th of April I spoke to Mr. Quaid, and he saw the superintendent about permitting me to resign, because I was not able to take up the work. So on the 17th I went and saw Dr. White, and I explained that I did not feel any better, and I did not feel able to take up the work again, and I wished permission to resign without notice, and he said, "That is all right, Burroughs; it is not necessary to work out your notice. Go and tell Mr. Quaid to fix that up and it will be all right." I never knew that any charge was preferred against me until I read in the Star that Mr. Quaid had given evidence of a charge that was preferred against me of neglect of duty. That is the first I knew of the matter.

I wish to speak, too, of the mutton, as to the quality of mutton that has been served there a great deal of the time. I have seen numbers of times when there was nothing but old wet ewes and stags were sent in there. It was put on our table, and I don't know whether it was used in making broths for sick patients or not; but I know it was sent in to our table, and the majority of the people refused to eat it, it was so strong and not fit to eat.

As to the fish, when I first went there I tried the fish a couple of times, but I found they were spoiled, and lots of times the parties that sat at our table would pass them up to the other end, to get away from them. The stench was so strong that we couldn't eat the few vegetables that we did, or drink a glass of skimmed milk, or something of the kind.

The CHAIRMAN. Was there ever anything good served in the part of the hospital that you had anything to do with?

Mr. BURROUGHS. I don't know.

The CHAIRMAN. I say the part of the hospital that you had anything to do with?

Mr. BURROUGHS. In our dining room there were a few good things, certainly.

Mr. SMYSER. Name one or two of them.

Mr. BURROUGHS. The dessert was pretty fair and the salt and pepper.

Mr. SMYSER. What else?

Mr. BURROUGHS. I don't know.

The CHAIRMAN. The water was pretty good, was it not?

Mr. BURROUGHS. It was about as good as the general run, yes. The eggs, I have seen eggs so bad that they couldn't be fried. When the man would look in the dining room and see what was coming they would say, "Look out boys, they are hashed-to-day." There would be large black spots in the eggs, that large. I have been told that that was caused by sulphur, or something of that kind in the egg. I don't know about that myself, but I have been told that was the cause of it. But the eggs were so bad that if you would stick a fork in them, or a spoon, they smelt like burnt feathers. I don't know what the contract calls for, whether it calls for this grade of goods or not, but, gentlemen, I am just stating facts that I know to be true. I have seen and heard a lot, especially when I was on sick leave. I used to be around there a good deal, and they have ground the kitchens down, so that I have known of cases where they would have to send from the general kitchen to one of the other kitchens and borrow three cakes of soap to wash the dishes, and borrow butter and things of that kind.

The CHAIRMAN. I guess that is all, Mr. Burroughs.

Mr. BURROUGHS. I wish to call your attention to another thing. It has been generally claimed that the oleomargarine is used by everyone in the hospital, but I will state as a positive fact that none of the doctors' families use oleomargarine outside of Doctor White. Doctor White does use oleomargarine. But the doctors, the head physicians, the staff and their families use Oyster's best butter.

The CHAIRMAN. Perhaps they buy it themselves.

Mr. BURROUGHS. That might be true, but if, as Dr. Logie says, it is so healthful for these patients, why don't they use it?

The CHAIRMAN. But if they want to buy it themselves you do not object, do you? Suppose he likes the taste of the butter, and buys it.

You don't know whether the butter is bought by the hospital or not, do you?

Mr. BURROUGHS. No.

Mr. SMYSER. Then, how do you come to find fault with that?

Mr. BURROUGHS. Oh, but it is claimed by Dr. Logie——

Mr. SMYSER. Do you not think that we heard what he said?

Mr. BURROUGHS. There are lots of things you have heard that is not true.

Mr. SMYSER. Oh, is that so?

Mr. BURROUGHS. Yes, sir; and if the whole truth about this institution was known there would be a general change.

Mr. SMYSER. If you have knowledge of any facts with reference to the food or the treatment of patients out there or anything of that kind, without indulging in romance——

Mr. BURROUGHS. This is no romance. This is facts.

Mr. SMYSER. Wait a minute. If you have knowledge of any fact that you have not told us, we would be glad to hear it.

Mr. BURROUGHS. This is a fact.

Mr. SMYSER. What is?

Mr. BURROUGHS. About this butter.

Mr. SMYSER. Well, who cares, unless they are eating the butter at the expense of the Government? I don't care what they eat.

Mr. BURROUGHS. Well, they make the claim, and I want to prove that what they claim is false.

Mr. SMYSER. I don't care about that.

Mr. BURROUGHS. Oh, you don't want to know the truth.

Mr. SMYSER. You are simply here to criticise what some fellow has said.

Mr. BURROUGHS. I am objecting to these statements.

Mr. SMYSER. If you know of any fact affecting the management of that institution or anything about Dr. White, the patients, or the attendants, or anything of that kind, or improper food, that we ought to know, we would be glad to have you state it; but we do not ask you for any of your criticisms of what some fellow has said here.

Mr. BURROUGHS. I am telling you——

Mr. SMYSER. That is not your province. If you have any facts, state them.

Mr. BURROUGHS. Well, that is a fact, what I told you; every word of it.

Mr. SMYSER. Suppose it is, what of it?

Mr. BURROUGHS. You said you wanted to know facts, and I have told you facts; every word.

Mr. SMYSER. But you do not know anything about whether these doctors, if they do eat butter, buy it themselves or not, do you?

Mr. BURROUGHS. I know that they eat butter.

Mr. SMYSER. Well, I say, suppose they do; what of it?

Mr. BURROUGHS. Well——

Mr. HAY. I suppose, Mr. Burroughs, what you mean to say is that these doctors came and testified that they did not eat butter?

Mr. BURROUGHS. Yes.

Mr. HAY. And you come here and say that they did eat butter?

Mr. BURROUGHS. Yes, sir; that is the idea. I want to prove that they did, and that they did not state true facts.

The CHAIRMAN. You think the doctors out there are a pretty bad lot, do you not?

Mr. BURROUGHS. No, sir; some of them is as good as walks in shoe leather.

The CHAIRMAN. Which ones would you give your recommendation to?

Mr. BURROUGHS. From my experience, I found Dr. Blackburn and Dr. Schwinn, and Dr. Fitch, here [indicating] as clever men as I ever met in my life.

The CHAIRMAN. I guess that will do, Mr. Burroughs.

#### TESTIMONY OF CARL H. SOPER.

CARL H. SOPER, having been duly sworn, was examined and testified as follows:

Mr. SOPER. I have nothing at all to do with the Government Hospital.

The CHAIRMAN. I merely asked you whether you would swear to——

Mr. SOPER. What he did?

The CHAIRMAN. The truth. That is all. I will ask you some questions, and I only want you to tell the truth.

Mr. SOPER. I will tell the truth all right.

The CHAIRMAN. What is your name?

Mr. SOPER. C. H. Soper.

The CHAIRMAN. What is your business?

Mr. SOPER. I run a small business at the car exchange, and I have been running it for the last two years.

The CHAIRMAN. What kind of a business?

Mr. SOPER. Fruits, cigars, and groceries.

The CHAIRMAN. Do you know Mr. Maenche?

Mr. SOPER. Yes, sir.

The CHAIRMAN. What sort of a fellow is Mr. Maenche?

Mr. SOPER. Well, I suppose he is a man, the same as you or I or any of the rest of us. In what way do you mean?

The CHAIRMAN. Is he a hard drinker?

Mr. SOPER. On several occasions he has been in my place kind of unruly, and on one occasion I fired him out.

The CHAIRMAN. Did you ever drink with him yourself?

Mr. SOPER. No.

Mr. HAY. How long ago was that occasion you speak of?

Mr. SOPER. It was some time last winter. I have no idea what time in the day it was. It was at night.

Mr. HAY. What time of the day was it?

Mr. SOPER. I don't know. It was at night, I say. Coming home, you know. I suppose he was going back to the hospital. I don't know.

Mr. SMYSER. Was he drunk?

Mr. SOPER. Certainly he was drunk.

Mr. SMYSER. Well, that is what I am asking you.

Mr. WALLACE. Were his visits frequent?

Mr. SOPER. Sir?

Mr. WALLACE. Did he come there very often?

Mr. SOPER. When he used to come back there; he lived in the hospital, I suppose. He was the head man in the laundry.

Mr. WALLACE. I mean was he at your place often?

Mr. SOPER. Certainly. Every time he came in he had a private conversation with me, and acted as though he would run my business, or would like to run it. He was never particular in his language. There was no place for women there, and they would come into my place. That is the only place for them there. He was never particular what he said when he was in there. It didn't make no difference who was in there. The doctors' wives would be in there, and he would let out an oath or anything else. Several times I called him down about it, but as a little soft soap I let him go until I couldn't let it go no longer. I keep coffee and sandwiches and things there, and one night he got to arguing with me about the coffee he got there, and what they got at the institution, so he took me too far and I told him what I would do to him if he didn't get out.

Mr. SMYSER. What did you say you would do to him?

Mr. SOPER. I told him I would try to break his jaw. I don't know whether I could do it or not. [Laughter.]

The CHAIRMAN. Were you ever in St. Elizabeth's Asylum yourself?

Mr. SOPER. Was I ever in there? You mean to work?

The CHAIRMAN. As an employee.

Mr. SOPER. No, sir.

The CHAIRMAN. Were you ever there as a patient?

Mr. SOPER. Why, no, sir.

The CHAIRMAN. I only wanted to know; that is all.

#### TESTIMONY OF CURRY THRIFT.

CURRY THRIFT, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Thrift, you were an attendant at St. Elizabeth's, were you not?

Mr. THRIFT. Yes, sir; I went there in that capacity.

The CHAIRMAN. How long were you there?

Mr. THRIFT. Well, to the best of knowledge, I think it was the 22d of November, 1901, that I went there, and I left June 2, 1905.

The CHAIRMAN. What have you to say in regard to the treatment of the patients there?

Mr. THRIFT. Well, in regard to the treatment of patients, they were treated the best they could be treated according to the help we had.

The CHAIRMAN. Did you ever see any of them badly treated?

Mr. THRIFT. I never saw them badly treated. We took the disturbed patients, when they had to be restrained, and locked them up in a room, to prevent them from destroying property or to keep them from injuring themselves or other patients. You can't handle such cases as that with kid gloves. You have got to use some force, but I don't consider it brutality at all.

The CHAIRMAN. Did you ever see any unnecessary harshness?

Mr. THRIFT. No, sir; I never did. I never did see any force that was used toward a patient that was not necessary to conquer such patient, whoever it might be. Possibly a man might be on a ward with 30 or 35 patients by himself from 6 to 8 o'clock at night. Frequently that occurred to me. We would have disturbed patients that were restrained to look out for the welfare of the patients. If we had a patient who became disturbed and got to abusing some other patient,

we had to lock up the patient. We would take the patient and seclude him in a room or something where he couldn't do any damage. In cases of that sort you have to use some force.

The CHAIRMAN. Did you know a patient by the name of Kinsey?

Mr. THRIFT. I certainly did.

The CHAIRMAN. Mr. Kinsey testified that you tore a finger nail off of him?

Mr. THRIFT. Never. I can explain fully how Kinsey's finger nail got torn off. I say I can explain fully, but I don't know that I can. I know about how it happened.

The CHAIRMAN. Let us hear it.

Mr. THRIFT. To the best of my knowledge—well, I don't know even if I was on the ward or not, but it happened by him getting caught in the jamb of the door. I don't even remember if I was on the ward or not on that occasion, but I remember it being caught in the door and being done in that way.

The CHAIRMAN. Did you choke him and strangle him and cut his wind off?

Mr. THRIFT. No, sir; I never did. I never had occasion to do it.

The CHAIRMAN. Did you ever put your arms around his neck and throw him violently on the floor?

Mr. THRIFT. No, sir; I had no occasion to hug Mr. Kinsey whatever. Mr. Kinsey and myself got along very well together on the ward. When he first came in he wasn't so bad, but after he was there a while he became very much disturbed and had to be locked up in a strong room frequently while I was assistant man in charge of the ward at the time the man in charge was off. Of course we had to lock up this man, and we were supposed to go in his room and look at him every hour or half hour to see if he was getting along all right, and very often we would go in there and of course he had bedding in there, such as it was, and he would take a pillow slip and wind up something in it, possibly some hair out of the mattress, and get it good and wet, and as soon as you opened the door down you would go. He would paste you one. He was a man weighing about two hundred and fifty or two hundred and sixty pounds when he came there, and a small man like me had to use some force in order to conquer him. Still I never had any trouble with Kinsey and we got along very well. Since he has been out I have visited him several times, and I have never had him treat me badly in my life. I don't know why such a charge should be made against me by him. Not a month ago I was down there and spent two hours with him.

The CHAIRMAN. What have you to say about the food there?

Mr. THRIFT. Well, the food is sometimes good, sometimes not so good, and then again it was bad. [Laughter.]

The CHAIRMAN. Did you ever make any complaint about the bad food?

Mr. THRIFT. I certainly did. We complained a number of times to the supervisors, and no action was taken whatsoever, and we waited a number of times for the board of visitors, but we could never see them, so we decided that we would get a committee to wait on the board of visitors when they came over. So on one occasion we happened to catch them in the hospital and we waited on them, twenty some of us in number. We explained fully the details concerning the food, but I never noticed any improvement in it at all. I understand that one of



the members of the board of visitors claimed that it is the finest corn beef he ever ate. He must have got hold of a good piece, because I never did.

The CHAIRMAN. Did you leave the hospital voluntarily?

Mr. THRIFT. I did. I tendered my resignation, and it was accepted by Dr. White on the 2d of June, 1905.

The CHAIRMAN. What are you doing now?

Mr. THRIFT. I am in the District fire department. I notice here—of course it don't amount to anything—but I noticed in a statement the other day that one of the fellows summoned here claimed that a fellow could not get married off of \$35 a month. I was not as wise as he was. I was getting \$30. They promised I would get more all the time, and I thought if I was going to get more money I could take care of a woman, so I went to work and got one. [Laughter.]

They told me that after I graduated as a nurse I was to get \$2 50 increase each six months, until \$40 was reached. The first six months rolled around, and I went around and signed the pay roll, and it was the same old thing—no increase. I didn't say anything. I let it go for the next six months, and when they rolled around there was no increase then. So I waited on Dr. White concerning it, and he advised me to go and see the financial secretary, as he had nothing to do with it. I went to see Mrs. Hardy, and she advised me to see the supervisors. I went to see the supervisor, and he advised me to go and see Dr. Logie, the physician I was working under. He said he would talk to Dr. White and Dr. White would refer it to the financial secretary and see what could be done. [Laughter.] But fortunately I didn't get the \$2.50 increase at all, and when I resigned the financial secretary said to me, "Mr. Thrift, you are resigning at the wrong time. If you resign now you do not get that \$2.50 increase." Well, I had waited two years and a half for it, and I thought I could afford to leave it behind. I didn't get it at all.

Mr. SMYSER. Do you think they have enough attendants there?

Mr. THRIFT. No.

Mr. SMYSER. You would not swap your wife for that \$2.50, would you?

Mr. THRIFT. No indeed, sir.

The CHAIRMAN. You do not have enough attendants?

Mr. THRIFT. No; we did not. For nine months I was employed on Gray Ash ward, one of the most violent wards in the institution, with the exception of Howard Hall. I never worked there. Most of that time we had four attendants there. I was then acting as assistant man in charge of the ward. I was put in charge of the ward, and put in charge of the hospital ward. I don't know how many patients were on it now—Dawes first. When the new buildings were opened up, across the road next to Congress Heights, I was put in charge of a hospital ward with 30 to 35 patients on it. Part of the time I was there alone, and part of the time I had another man with me. Out of that number of patients—bed patients the principal part of them—there was anywhere from 12 to 14 men who had to be fed the same as an infant. Just imagine one man going around the ward three times a day feeding them with a spoon. I considered there was not enough help. Frequently I asked for more help, but I couldn't get it at all. They said they only allowed so many men on so many wards.

The CHAIRMAN. How about the hours? You think they were too long?

Mr. THRIFT. There was no end to them at all, in my estimation. I would go to work at 6 o'clock in the morning on one day, and sometimes I would get off at 5 or half-past and sometimes 6. Sometimes I didn't get off at all.

Mr. HAY. What hours do you have where you are now?

Mr. THRIFT. All of them—twenty-four out of twenty-four.

Mr. HAY. You are on duty now that long?

Mr. THRIFT. I am doing double duty now; yes, sir.

Mr. HAY. Then your hours now are worse than they were there?

Mr. THRIFT. They are worse than I had before, but I am getting paid for them and before I wasn't.

The CHAIRMAN. What do you get paid in the fire department?

Mr. THRIFT. I get \$75 every month, and every fifth day off and twenty days' leave.

Mr. HAY. How many days off?

Mr. THRIFT. Every fifth day off.

Mr. HAY. And how much leave?

Mr. THRIFT. 20 days.

Mr. HAY. How much will you get if they pass this bill?

Mr. THRIFT. I don't know. I could answer that question readily after it passes.

Mr. SMYSER. You do not want to take any chances on it?

Mr. THRIFT. No.

The CHAIRMAN. I am on the District of Columbia Committee, and we have reported the bill to the House, anyway.

Mr. THRIFT. Well, report it favorable.

#### TESTIMONY OF THOMAS SEATON.

THOMAS SEATON, having been duly sworn, was examined and testified as follows:

Mr. SMYSER. Where do you live?

Mr. SEATON. I live at 928 Twenty-second street NW.

Mr. SMYSER. Were you ever an attendant out at St. Elizabeth's?

Mr. SEATON. Yes, sir.

Mr. SMYSER. When?

Mr. SEATON. I went over there about the middle of April.

Mr. SMYSER. Of what year?

Mr. SEATON. Year before last. I left there the 1st of October.

Mr. SMYSER. When?

Mr. SEATON. The same year.

Mr. SMYSER. So you were there about six months, or a little over?

Mr. SEATON. Yes, sir.

Mr. SMYSER. What were your duties?

Mr. SEATON. I was an attendant in the hospital.

Mr. SMYSER. What ward?

Mr. SEATON. Gray Ash ward most of the time.

Mr. SMYSER. Do you know anything about the treatment of the patients while you were there?

Mr. SEATON. Yes, sir; I know something about it. I could see a good bit in six months.

Mr. SMYSER. What did you see?

Mr. SEATON. Well, I saw that there was not enough help there, enough attendants, on the ward I was on.

Mr. SMYSER. Why?

Mr. SEATON. Well, because the patients, most of them, was very violent at times, and very hard to handle a heap of times. There was supposed to be three and four men there, and sometimes there was only one. Then, at times when they were supposed to take the men out walking, they couldn't do it on that account, and they would be kept in.

Mr. SMYSER. About the treatment of patients; were they maltreated?

Mr. SEATON. They were treated as well as they could be under the circumstances.

Mr. SMYSER. Were any of them abused?

Mr. SEATON. Yes, sir.

Mr. SMYSER. Describe it. Who was the patient that was abused?

Mr. SEATON. They was abused in this way. Some of the patients there would be liable to jump you at any time, and accuse you of different things, like an insane person would, and at times you would have to handle them a little rough, to defend yourself.

Mr. SMYSER. Did you handle some of them rough?

Mr. SEATON. I didn't handle them any rougher than I could help.

Mr. SMYSER. I did not ask you about that. Did you handle them rough?

Mr. SEATON. Yes, sir; I would call it rough.

Mr. SMYSER. Who was the patient that you handled in that way?

Mr. SEATON. I don't know; a good many of them.

Mr. SMYSER. Give us the name of one or two, can you not?

Mr. SEATON. Yes, sir.

Mr. SMYSER. Well?

Mr. SEATON. There was a man there that was very hard to handle by the name of Frazier.

Mr. SMYSER. You handled him roughly, did you?

Mr. SEATON. Not any rougher than I could help, I say.

Mr. SMYSER. What did you do to him, and what did he do to you?

Mr. SEATON. When he jumped on me and went to strike me in the face, the like of that [indicating] I would slap him back, and put him in a room or something like that.

Mr. SMYSER. Did you hit him back?

Mr. SEATON. Yes, sir.

Mr. SMYSER. With your open hand, or your fist?

Mr. SEATON. With my open hand. I never tried to beat his face, or beat him up, in my life.

Mr. SMYSER. What did you do that for?

Mr. SEATON. Because I couldn't help myself. I had no help.

Mr. SMYSER. Did you hurt him?

Mr. SEATON. No, sir; not to amount to anything.

Mr. SMYSER. Did you leave any marks on him?

Mr. SEATON. No, sir.

Mr. SMYSER. Did you think it was necessary to do that?

Mr. SEATON. Yes, sir; I had to do it.

Mr. SMYSER. Did you do it for the purpose of hurting him?

Mr. SEATON. No, sir; I would get the worst of it most of the time.

Mr. SMYSER. Or did you do it simply to handle him and control him?

Mr. SEATON. No, indeed, just enough to protect myself and to control him, for his own good and the good of the patients.

Mr. SMYSER. Did you maltreat other patients, or use them in the same way?

Mr. SEATON. Only when it was positively necessary.

Mr. SMYSER. Did you ever abuse a patient over there?

Mr. SEATON. No, sir; not unnecessarily.

Mr. SMYSER. That is what I mean.

Mr. SEATON. No, sir; I never did.

Mr. SMYSER. Purposely, I mean, for the sake of abusing him?

Mr. SEATON. No, sir; I never.

Mr. SMYSER. In using such force as you did toward patients there, did you ever use more force than was necessary?

Mr. SEATON. No, sir. I always did the best I could to manage them for their own good.

Mr. SMYSER. How was it with other attendants, from what you saw?

Mr. SEATON. They did the same way I did. When they would be caught in there alone, or probably with another attendant, that way, and there was a fight or something like that, you would have to handle them a little rough sometimes to do anything at all with them.

Mr. SMYSER. Did you ever see other attendants ill-use patients?

Mr. SEATON. No, sir.

Mr. SMYSER. When I use the word "ill-use" I do not mean such force as was necessary to restrain a patient, but to abuse them?

Mr. SEATON. No, sir; I never did.

Mr. SMYSER. Or to use violence unnecessarily?

Mr. SEATON. No, sir; I never did while I was there.

Mr. SMYSER. Is that true of the whole time you were there?

Mr. SEATON. Yes, sir. Most of the time I was there I was only on one ward most of the time.

Mr. SMYSER. Did you ever see an instance while you were there that you yourself would characterize as abuse of a patient?

Mr. SEATON. No, sir. I remember particularly one case, once in the evening—I don't remember the date of it.

Mr. SMYSER. Let us have it.

Mr. SEATON. I was left on the ward alone with about twenty-five men there and they got to fighting. There was not enough help there to take them out walking or anything, and always when they are kept in they are a heap worse, and they get to making all kinds of a fuss and fighting and breaking things up. I was there alone, and I went to the phone and phoned over to the supervisor to send me help. There were only two of us, and one with his Sunday evening off. He said I would have to do the best I could; that if he could send anybody he would, but he never came, and it was almost impossible to do anything at all with them, they were so violent, breaking out windows and acting in various ways. I did the best I could.

Mr. SMYSER. Was Hawkins on that ward?

Mr. SEATON. Yes, sir.

Mr. SMYSER. Did you see him maltreat the patients?

Mr. SEATON. No, sir.

The CHAIRMAN. Is Hogan there?

Mr. SEATON. He left directly I did. He had charge of the ward, Hogan did.

The CHAIRMAN. Did you ever see him maltreat patients?

Mr. SEATON. No, sir.

The CHAIRMAN. Did you know a patient by the name of Daddysman over there?

Mr. SEATON. Yes, sir; he was on that ward a little while while I was there.

The CHAIRMAN. Did you ever see Hogan get into anything like a scrap with him?

Mr. SEATON. No, sir; I never did. He complained a heap about not going out, and when he would take him out walking he would try to get away all the time. Hogan refused to take him out on account of that. He complained considerably about that. I don't know that there was any occasion—he seemed to be a pretty good man, and I don't know of any occasion to scrap with him.

The CHAIRMAN. Did you ever know of him shooting a revolver off on the floor there in the ward?

Mr. SEATON. No.

The CHAIRMAN. Did you ever hear of such an occurrence?

Mr. SEATON. No, sir; not while I was there.

Mr. SMYSER. What have you to say about the food?

Mr. SEATON. Sometimes it would do, and sometimes it was pretty bad.

Mr. SMYSER. Did you make a complaint of it?

Mr. SEATON. Yes, sir; I complained to Mr. Hogan, the head of the ward, but I couldn't get much satisfaction. He said I would have to do the best I could.

Mr. SMYSER. How frequently did Doctor White visit the ward while you were there?

Mr. SEATON. I was there a little over six months, and to my knowledge he was never through that ward at all, to my knowledge.

Mr. SMYSER. Did the board of visitors ever go through there?

Mr. SEATON. No, sir; not to my knowledge.

Mr. SMYSER. Any of them?

Mr. SEATON. No, sir.

Mr. SMYSER. Do you know them?

Mr. SEATON. Yes, sir; I want to say a word in regard to the attendants—why so many of them leave there. I was there six months, and one morning, I was getting on very well, the supervisor came around and told me that I should take a wheelbarrow and shovel and a broom and go around and clean around streets. I told him that I didn't know anything about that, that that was not the understanding when I came there, and it was impossible for me to do it and take care of the work on the ward and keep the dining room in shape. He said I couldn't blame him. I asked him if there was anything I had done that was not satisfactory, and he said no, the work was perfectly satisfactory, but that was the doctor's orders and I would have to do that or turn in my keys. So that was the time about 12 or 15 of us quit. There is where the complaint came in.

Mr. SMYSER. Did you have a little strike among you in reference to the work there?

Mr. SEATON. No; I never had a word with anybody.

Mr. SMYSER. Did you and six or eight others get together and say: "We are not going to work on the street?"

Mr. SEATON. No, indeed; I never had a word with anybody. I was surprised when he told me. The work I had to do kept me busy in the dining room and on the ward—it was impossible for me to do it, so I thought the best thing was to quit.

Mr. WALLACE. Coming back to Hawkins, you say you never saw him mistreat any patient there?

Mr. SEATON. No, sir; I never did.

Mr. WALLACE. Did you ever see him act as you did, slap them with his open hand?

Mr. SEATON. Yes, sir; he did that. All of them on there would have to do it occasionally.

Mr. WALLACE. Did he do it with his closed fist, or anything like that?

Mr. SEATON. No, sir; I never saw them hit with the fist. We always try to handle them without bruising them up, or injuring them like that. If there were two or three on there we could handle them, and handle them without any violence at all like. Some of them were large, average men—most of them pretty large, and they were hard to handle.

#### TESTIMONY OF MRS. DICEY DAVAGE.

Mrs. DICEY DAVAGE, having been first duly sworn, was examined and testified as follows:

The CHAIRMAN. You were employed as a cook at St. Elizabeth's, were you not, Mrs. Davage?

Mrs. DAVAGE. Yes, sir.

The CHAIRMAN. When was it?

Mrs. DAVAGE. I left there in March.

The CHAIRMAN. How long had you been there?

Mrs. DAVAGE. Seven years last November.

The CHAIRMAN. You worked there when Doctor Richardson was there first?

Mrs. DAVAGE. Yes, sir.

The CHAIRMAN. What part of the institution did you cook for?

Mrs. DAVAGE. I cooked in the general kitchen, but I cooked for the pay patients.

The CHAIRMAN. How many were employed there with you?

Mrs. DAVAGE. How many with me?

The CHAIRMAN. Yes; how many people were in the kitchen besides you?

Mrs. DAVAGE. There was a lot of them in the kitchen, but there were two on the work with me.

The CHAIRMAN. Two cooks?

Mrs. DAVAGE. There had been two, but they cut them down and just had me, one, at the last.

The CHAIRMAN. What did you think of the food you got—that you had to cook?

Mrs. DAVAGE. Sometimes it was good and sometimes it wasn't so good.

The CHAIRMAN. Was it generally pretty fair?

Mrs. DAVAGE. Sometimes the meat was pretty fair, and then again it was not hardly fit to use.

The CHAIRMAN. Did you ever complain about it?

Mrs. DAVAGE. Yes; I used to tell Miss Mulligan.

The CHAIRMAN. Did it do any good?

Mrs. DAVAGE. For some days it would be a little better.

The CHAIRMAN. But how about the vegetables?

Mrs. DAVAGE. Sometimes they were good, and sometimes they wasn't fit to use.

The CHAIRMAN. Was that so generally, with all vegetables?

Mrs. DAVAGE. Sometimes they was good, and sometimes they wasn't good.

The CHAIRMAN. What did you do when they were not good to use?

Mrs. DAVAGE. I washed them and picked out the best I could, and those that I didn't use I threw away. I didn't use it when it was so very bad.

The CHAIRMAN. When it was so bad that it was not fit to use you threw it away?

Mrs. DAVAGE. I throwed it away. I didn't use it. It was not fit to send out.

The CHAIRMAN. Who did you get your supplies from? Who furnished the things to use?

Mrs. DAVAGE. Miss Mulligan.

The CHAIRMAN. She was the housekeeper?

Mrs. DAVAGE. Yes, sir; the assistant.

The CHAIRMAN. The assistant housekeeper?

Mrs. DAVAGE. Yes, sir.

The CHAIRMAN. Was she a cook, too?

Mrs. DAVAGE. She used to be a cook before I went there.

The CHAIRMAN. Was the food as good under Dr. Richardson as it was under Dr. White?

Mrs. DAVAGE. I think Dr. Richardson used to buy a little better for my people. I don't know about the others. For the people I worked for I think Dr. Richardson bought better.

The CHAIRMAN. You cooked for the pay patients, did you?

Mrs. DAVAGE. Yes, sir.

The CHAIRMAN. How did the food supplied to them compare with the food that was supplied to the general patients? Do you know anything about that?

Mrs. DAVAGE. Mine used to be a little better than the others, but about the last they all got about the same.

The CHAIRMAN. About the same, as far as the food is concerned?

Mrs. DAVAGE. About the same.

The CHAIRMAN. What wages did you get?

Mrs. DAVAGE. Twenty dollars.

The CHAIRMAN. During all the time you were there?

Mrs. DAVAGE. When I first went there I got \$12.

The CHAIRMAN. And you were getting \$20 when you left?

Mrs. DAVAGE. Yes, sir.

The CHAIRMAN. Did you resign?

Mrs. DAVAGE. Yes, sir. Mr. French and I had some words and I left.

Mr. WALLACE. Had the food improved any before you left there?

Mrs. DAVAGE. Did I which?

Mr. WALLACE. I say, had the food gotten any better toward the latter part of your stay there?

Mrs. DAVAGE. No, sir; it was getting a little worse. The meat was very tough about that time.

Mr. WALLACE. How about the bosses' food? Do you know anything about that—the superintendent, doctors, etc.?

Mrs. DAVAGE. Well, I cooked for all the supervisors. I cooked for Mr. French and Miss O'Leary in that special dining room. Their food was tolerable fair.

Mr. BARCHFELD. They got about the same kind of food the pay patients got?

Mrs. DAVAGE. They got the same.

Mr. BARCHFELD. They could eat it?

Mrs. DAVAGE. Yes, sir; I guess they eat it. I cooked it and sent it into the dining room.

#### TESTIMONY OF BERNARD ROACH.

BERNARD ROACH, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Roach, when were you an attendant at St. Elizabeth's?

Mr. ROACH. I left there the 26th day of last August.

The CHAIRMAN. How long had you been there?

Mr. ROACH. Four years, four months, and sixteen days.

The CHAIRMAN. What ward were you on?

Mr. ROACH. Howard Hall the last two years and a few months that I was there.

The CHAIRMAN. That is where the criminal insane are put, is it not?

Mr. ROACH. Yes, sir.

The CHAIRMAN. What kind of patients did you have there? Were they boisterous?

Mr. ROACH. Some of them was, yes.

The CHAIRMAN. Did you ever see them badly handled?

Mr. ROACH. Yes; sometimes.

The CHAIRMAN. When I say badly handled, I mean handled with unnecessary harshness.

Mr. ROACH. Well, I think some of them could have been handled a little easier and got along just as well.

The CHAIRMAN. Who were the attendants who handled them with unnecessary severity?

Mr. ROACH. I saw one patient handled pretty roughly before two doctors and a supervisor one day.

The CHAIRMAN. Who was the attendant?

Mr. ROACH. I think there was four of them.

The CHAIRMAN. Who were they?

Mr. ROACH. There was a man named Browning and a man named McDonald and a man by the name of Carey. I think they were about all.

The CHAIRMAN. Who was the patient they handled badly?

Mr. ROACH. His name was McNab.

The CHAIRMAN. What was he doing?

Mr. ROACH. He went up on the landing to speak to one of the doctors, I believe. They forbid him going up to see him and saying anything, and he insisted that he would go, and so the doctor said:



"Take the man and do"—well, I suppose he must have meant to do what they wanted to with him.

The CHAIRMAN. What was the doctor's name?

Mr. ROACH. Dr. Taylor and Dr. Toner.

The CHAIRMAN. Are these attendants there now?

Mr. ROACH. Yes, sir; I think they are.

The CHAIRMAN. How did they handle him? What did they do to this fellow?

Mr. ROACH. They choked him.

The CHAIRMAN. How?

Mr. ROACH. With their arms.

Mr. SMYSER. Go on and describe it. Tell us about it.

Mr. ROACH. There was one man that had hold of his arms and the other man had hold of his feet and the other man had hold of his neck. They had him clear to the ground. They choked him until he was lifeless and put straps on him and throwed him in a room. I don't know whether you call that very rough treatment or not. That is the way they handled him, simply because he wanted to speak to the doctor.

Mr. SMYSER. Did they pick him up bodily and toss him in a room?

Mr. ROACH. Yes, sir.

The CHAIRMAN. Were you one of the attendants who helped in that?

Mr. ROACH. No, sir; I was not. I was looking out of the window I was not in charge of any patients. I was in charge of the dining-room while I was there.

The CHAIRMAN. Were you in charge of patients at all while you were there?

Mr. ROACH. Not in Howard Hall.

The CHAIRMAN. When did this thing happen?

Mr. ROACH. Lets see. About a year before I left there, or nine or ten months, I guess. I don't exactly know.

The CHAIRMAN. That must have been in 1904. You say you left there in August, 1905?

Mr. ROACH. Yes, sir.

The CHAIRMAN. So it must have been the latter part of 1904, was it not?

Mr. ROACH. Somewheres along there; yes, sir. I disremember exactly what time it was, but I think it must have been somewhere along there.

The CHAIRMAN. What was McNab put in there for, do you know?

Mr. ROACH. I am not sure, but from what I could understand he was put in there because he attempted to kill his wife.

The CHAIRMAN. Because he attempted to kill his wife?

Mr. ROACH. That is what I heard. I don't know how true it is.

Mr. SMYSER. What kind of a man was he physically? Was he big little, stout, or how?

Mr. ROACH. Physically he was a pretty good-sized man.

Mr. SMYSER. What did he weigh?

Mr. ROACH. I suppose this man weighed about 235 pounds. I don't know; I just judge that.

The CHAIRMAN. Did he just calmly walk up those stairs to the landing, or did he run up as though he was going to do something serious?

Mr. ROACH. I don't know. He could have done something serious if he wanted to, because he went up on the landing where the doctors was at. They wouldn't have anything to say to him. The attendants has orders not to allow patients to go up on the landing. Of course, the doctor didn't go through the yard, and if the patients wanted to speak to the doctors they would have to go up on the landing. He went up on the landing, and they just went and got him and brought him down.

The CHAIRMAN. Did you hear this doctor give instructions to these attendants?

Mr. ROACH. No, sir; I didn't, but they knew what the attendants were doing. They stayed there, and they certainly knew what went on, because they were standing there and looking on.

The CHAIRMAN. What sort of straps did they put on him?

Mr. ROACH. These big leather cuffs around the wrists, big straps, with a great big iron band around the waist, with a lock put back of him.

The CHAIRMAN. He had free use of his hands, did he not, to a certain extent?

Mr. ROACH. This much [indicating].

The CHAIRMAN. His elbows were not strapped to his body, were they?

Mr. ROACH. They might use them this way [indicating]. That is the way they were strapped [indicating].

The CHAIRMAN. Not as close as you are holding your hands now, were they?

Mr. ROACH. Yes, sir; in that position.

Mr. HAY. Why did you leave there?

Mr. ROACH. I was in charge of the dining room, and I was getting along all right. I was allowed to go out every night. That is, I was on duty some nights until 10 o'clock. If somebody came in—some single man came in to go to bed—I could go out. Every other night—well, I don't say every other night the last year I was there—but some nights I had to stay on at night till 10 o'clock.

Mr. HAY. I want to know why you left.

Mr. ROACH. I will get to that after a while. One morning was ordered to go to the place called East Lodge. There was a very bad class of patients there. I had worked among those patients. I didn't know why I was to be sent back there, as I was getting along all right in the dining-room. I asked the supervisor why I was, and he said it was the doctor's orders. I asked Dr. Toner, who was in charge, why I was to be sent there, and he says, "You are supposed to go where we send you." I says, "That may be supposed, but I don't have to go, and I don't want to go there." He said: "Well, you have got to go." Well, he spoke in a very abrupt manner to me. I don't know why he did it, but I says, "I don't have to go, and I am not going." He says, "You can use your own pleasure about that." I said, "Yes," and I gave him my keys and walked out.

Mr. HAY. Neither Dr. Taylor or Dr. Toner are out there now, are they?

Mr. ROACH. I don't know. Dr. Taylor left there before I did, but Dr. Toner, I don't know. I have never been there since. I worked in the dining room two years and three months, I believe, or something like that.

Mr. WALLACE. Do you know anything about the treatment of a patient by Hawkins?

Mr. ROACH. No, sir.

Mr. WALLACE. Do you know how Lloyd treated patients?

Mr. ROACH. No, sir; I never worked with them.

Mr. WALLACE. Or Donohue?

Mr. ROACH. I never worked with them.

Mr. WALLACE. Do you know anything about the board of visitors out there, and Dr. White?

Mr. ROACH. I don't know. I have never seen the board of visitors through there?

Mr. HAY. Would you know them if you did see them?

Mr. ROACH. No, sir; I would not.

Mr. HAY. Then they might have been there, and you would not know whether they were there or not. Is that it?

Mr. ROACH. No, sir.

Mr. WALLACE. You mean the board of visitors?

Mr. ROACH. I would know it if they came there. I guess I would have known it.

Mr. WALLACE. You know Dr. White, though?

Mr. ROACH. Oh, yes; I know Dr. White. That is, I have seen him. I never spoke to him.

Mr. WALLACE. Give any description you can as to the place in Howard Hall where the patients have recreation, etc. 'Do you know anything about that?

Mr. ROACH. They didn't have any only in the yard, about—I don't know how wide it is, but a very small place—with a big brick wall around it; and in the summer time you might as well be in an oven, and in the winter time you might as well be in an ice house. They used to have it when I first went there under Dr. Richardson.

Mr. WALLACE. Where is that building located?

Mr. ROACH. That is near the little railroad that goes by there, on top of the hill.

Mr. SMYSER. Do you mean it is that area way surrounded by the building where the criminals are?

Mr. ROACH. Yes, sir.

The CHAIRMAN. You could not very well allow the class of people in Howard Hall to wander around the grounds loose, could you?

Mr. ROACH. Well, no, sir; but they have been taken out of there before.

The CHAIRMAN. Were they ever taken out?

Mr. ROACH. With attendants—the attendants would take them out.

The CHAIRMAN. Were these men ever taken out on the grounds with attendants?

Mr. ROACH. They have been; yes, sir.

The CHAIRMAN. How often?

Mr. ROACH. Well, sometimes they would be taken out three or four times a week, and sometimes every day, especially on Sundays—they would be taken out every Sunday.

Mr. SMYSER. Were the people who were taken out the same class of patients that are there now?

Mr. ROACH. About the same. There was no difference, I don't think.

The CHAIRMAN. Are they not taken out at all, now?

Mr. ROACH. Not up to the time I left—from the time Dr. Richardson died until I left. I never seen a gang of patients taken out, only to go and shovel coal on the coal car.

The CHAIRMAN. Were they taken out individually?

Mr. ROACH. If a patient wanted to go to the store, or somewheres, to buy tobacco, or something like that, you can ask the supervisor, and he will give permission to take him over to the store—one patient.

Mr. WALLACE. They take them out of that amphitheater there—they take them from there up to their rooms, do they not?

Mr. ROACH. Oh, yes, sir; they take them out every day and carry them to their rooms at night.

#### TESTIMONY OF HARRY TALBERT.

HARRY TALBERT, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your trade?

Mr. TALBERT. Me? I haven't got any yet awhile. I am learning the carpenter's trade.

The CHAIRMAN. Learning what?

Mr. TALBERT. The carpenter's trade.

The CHAIRMAN. Did you ever do any work in St. Elizabeth's?

Mr. TALBERT. Yes, sir.

The CHAIRMAN. What kind of work?

Mr. TALBERT. I worked there for the fire alarm company.

The CHAIRMAN. Doing what?

Mr. TALBERT. Helping to run wires through the buildings.

The CHAIRMAN. Did you know any of the attendants there?

Mr. TALBERT. Yes, sir.

The CHAIRMAN. Did you know a man named Hawkins?

Mr. TALBERT. Yes, sir.

The CHAIRMAN. Did you ever give him a piece of telephone wire?

Mr. TALBERT. Yes, sir; I gave him a piece down there one morning.

The CHAIRMAN. How big was it?

Mr. TALBERT. It was cable wire, I suppose, about as big around as your little finger—the end of it.

The CHAIRMAN. One of these wires connected with the receiver such as is on this telephone here, for instance? One of these wires covered with green silk?

Mr. TALBERT. This one was covered with red and white insulation.

The CHAIRMAN. Was it the same character of wire as is used on telephone receivers in residences and public places?

Mr. TALBERT. Yes, sir; I think so.

The CHAIRMAN. Did he ask you for it?

Mr. TALBERT. Yes, sir; he came along and asked for a piece of it. I did not know what he was going to do with it.

The CHAIRMAN. Do you know now?

Mr. TALBERT. No, sir; he said it was a good thing to tan patients with, but whether he used it or not, I don't know.

The CHAIRMAN. Is that all you know about it?

Mr. TALBERT. Yes, sir.

## TESTIMONY OF J. W. FROST.

J. W. FROST, having being duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your occupation?

Mr. FROST. I am the secretary and treasurer, and also the manager of the National Automatic Fire Alarm Company.

The CHAIRMAN. Is that system used in St. Elizabeth's?

Mr. FROST. That is the one that is being installed there.

The CHAIRMAN. That is being installed there now?

Mr. FROST. It is not finished yet.

The CHAIRMAN. Do you in consequence of your position, have to go to St. Elizabeth's frequently?

Mr. FROST. Yes, I go there every three or four days.

The CHAIRMAN. How long have you been going over there regularly?

Mr. FROST. About two years and a half.

The CHAIRMAN. Do you know anything about the treatment of patients over there?

Mr. FROST. No, sir.

The CHAIRMAN. Do you know anything that will benefit us in this investigation?

Mr. FROST. I think I know something that will benefit the public, and therefore the committee. I want to state that this morning I was subpoenaed. I got my subpoena late last night. I was subpoenaed yesterday morning. It was left at my office at the Corcoran Building, and last night I received it, and I have come here as soon as I could, in answer to the subpoena.

The CHAIRMAN. That is all right.

Mr. FROST. I want to state further that some one came to my office early this morning and stated that it would be for my interest as a contractor doing work for the Government to come here and refute some evidence that was given by an employee or an ex-employee of our company on yesterday. I want to say that I do not know—

The CHAIRMAN. Did some one say this to you?

Mr. FROST. Some one came to the office, I am informed, I will say. I was informed this morning by one of my employees, one of the operators, that some person came there this morning and stated that it would be for Mr. Frost's interest to come here and refute the evidence of some ex-employee that was given yesterday. I do know what that evidence is, but I want to say that I know nothing whatever about the management down there, as far as the medical end of it is concerned. I know nothing about their food, or lack of food, but I do know something about the business administration of the asylum, which I am prepared to testify in connection with.

The CHAIRMAN. You have not any idea who the man was who left this word?

Mr. FROST. No; I have not any knowledge of my own. It was on information.

The CHAIRMAN. What is the information?

Mr. FROST. The information is that it was the same one that served the subpoena yesterday morning.

Mr. FREDERICK N. WEBBER. Mr. Chairman, I was at his office this morning, and I told his clerk he had better answer the summons. The

summons was left at his office the day before yesterday. This makes the third service that I have made to this man's office, and we have been unable to get answers. I told his clerk to say to him that he had better answer the summons, as he was a contractor for the Government—

The CHAIRMAN. You will be sworn after Mr. Frost finishes his testimony.

Mr. FROST. Also my operator ought to be sworn. I knew nothing about any subpoena until yesterday morning.

The CHAIRMAN. Never mind about that. You are here now.

Mr. FROST. This concern that I am manager of has a contract with the Interior Department for the equipment of St. Elizabeth's Hospital buildings with an automatic fire-alarm system.

The CHAIRMAN. Which automatic fire-alarm system is that?

Mr. FROST. It is the thermostatic system, operated under heat.

The CHAIRMAN. Is it the Gamewell system?

Mr. FROST. No, sir; it is not the Gamewell.

The CHAIRMAN. Is it the same system as they have at Manhattan?

Mr. FROST. No, sir; it is a thermostatic system. This system is thermostatic, and the others are manual.

Mr. SMYSER. What is the point in this testimony?

Mr. HAY. We are examining into the business end of it at the same time.

Mr. SMYSER. What suggestion has been made about this? I submit, what suggestion has been made in connection with this business out there?

Mr. HAY. None at all, but if he has anything to say about the business administration, we might as well have it.

Mr. SMYSER. If we are going to bring every contractor here—

Mr. FROST. I think I can show the application of it very shortly, as to the business administration there. I understand the committee is investigating the affairs at St. Elizabeth's, and this has reference to the business management there.

The CHAIRMAN. Oh, go ahead and give your testimony.

Mr. FROST. The contract was awarded us in 1903 by the Interior Department, just before Dr. White took charge, and we proceeded to execute it. That contract provides, amongst other things, a certain way in which we shall receive payments on account, as with all contracts, as certain percentages of the work are completed. The contract provides in one clause that the party of the first part, the Interior Department, agrees to make payment to the party of the second part—that was us—through the disbursing officer of the hospital, at such time or times as the superintendent of the asylum should designate. It also provided that the representative of the Department who was appointed by the Interior Department to see that this contract was faithfully carried out, should make a certificate stating that the contract had been well executed up to date. It further provided that upon receipt of that certificate from the representative, the disbursing officer should pay us whatever was determined upon.

The CHAIRMAN. All right.

Mr. FROST. We made application for a payment about the middle of June. We did not receive our payment—

The CHAIRMAN. The middle of June of what year?

Mr. FROST. 1904. We did not receive our payment until July 21, some six weeks afterwards, although we in various ways tried to get Dr. White to act upon our application. He had sufficient authority to act, because he was superintendent. He was the representative, and he was the disbursing officer, so it was not necessary for us to go to anyone else. About the 20th of July we telephoned to him and finally found from his statement over the telephone that he did not know he was the representative of the Interior Department. That was seven months after the contract was made and five or six months after he was appointed. I called his attention to the fact that he was, and stated that he would find it out by communicating with the Interior Department. He then made us a payment on account, stating, as superintendent, that it was the time to ask for it, certifying, as representative, that we had properly done our work up to date—seven months afterwards—and paying us as disbursing officer; a sort of Pooh Bah arrangement. About that time there was some difficulty in connection with an extension of time. We applied for an extension of time under the contract. It is a very large plant, the largest in the world of that kind, and a very difficult one to install. He would not allow our application and asked me to make certain affidavits in connection with the verbal showing that I made for that purpose.

I made those affidavits, and one of the items was a matter of certain locks. We had ordered some locks of a firm called Barber & Ross, and we were delayed in connection with the locks, and I went to New York personally, to the Corbin Lock Company, to see them and see if they could not hurry them up. For some reason there was some delay. Their agents were Barber & Ross. One of the points that I made verbally to the Doctor was that these locks had not been received from Barber & Ross, that we had made every effort to get them, but had not received them. He then asked me to put this statement in writing in the form of an affidavit. I did so, swearing to it. I then sent my man up to Barber & Ross's and ascertained as a matter of fact that those locks had been there for three months, so I could not swear to that. So I put a P. S. to the affidavit, stating that I understood that since writing the above the locks had been there for three months.

The CHAIRMAN. Been where?

Mr. FROST. At Barber & Ross's, right here in Washington, and we had not been informed of it. No bill had been sent to us, and I concluded then that the Doctor was trying to get me, inadvertently, to swear to something. That was my opinion.

The CHAIRMAN. Was it Dr. White's business to find out whether these locks were at Barber & Ross's?

Mr. FROST. It was his business to find it out, I presume, after we had made a showing for an extension, in the way of investigating to see whether or not our claims were well founded.

The CHAIRMAN. Were these locks to be furnished under your contract?

Mr. FROST. Yes.

The CHAIRMAN. Why did he have anything to do with getting those locks?

Mr. FROST. He didn't have anything to do with getting them, but he had something to do with finding out whether our claims were well founded.

Mr. SMYSER. Whether you were telling the truth?

Mr. FROST. Whether we were telling the truth.

The CHAIRMAN. Was it not your duty to find out these things, and show good cause why you should have an extension of your contract?

Mr. FROST. I state that, owing to the fact that I signed that form of affidavit at a time when Dr. White knew very well that those locks were there and had been for some time.

The CHAIRMAN. How do you know that?

Mr. FROST. Mr. Mitchell, his representative informed me.

The CHAIRMAN. Why did you not know they were there?

Mr. FROST. Because they had not billed them to us, and had not informed us that they had them.

The CHAIRMAN. You contracted with Barber & Ross to furnish these locks. Why was it not your business to hunt up the locks and know where they were?

Mr. FROST. I did hunt them up.

The CHAIRMAN. But you did not find out until three months after they were received that they were there?

Mr. FROST. No, we did not.

The CHAIRMAN. It was not Dr. White's business to find out, at all, was it?

Mr. FROST. No. I say I got this point inadvertently. I did not know the locks were there.

The CHAIRMAN. Will you tell me why Dr. White should want you to swear to something that was not true?

Mr. FROST. From his correspondence with the Interior Department, he was doing all he could to cancel the contract.

The CHAIRMAN. In other words, you were not finishing the work in contract time, and he was trying to get them to cancel the contract because you were not fulfilling it?

Mr. FROST. We were fulfilling it to the best of our ability, and the contract provided that an extension should be granted when we made a proper showing.

The CHAIRMAN. How long did the contract give you to install this system?

Mr. FROST. One year.

The CHAIRMAN. And you have been two years and a half getting it in?

Mr. FROST. Yes, and we have not got it in yet. I will state now that it took nine months to install the Treasury Department—

The CHAIRMAN. We are not talking about the Treasury Department. You contracted to do this work in one year, and you have been two years and a half and it is not done yet.

Mr. FROST. We contracted with the understanding that on proper showing an extension would be given.

The CHAIRMAN. Was that in the contract?

Mr. FROST. Yes.

The CHAIRMAN. About the extension of time?

Mr. FROST. Yes, sir.

The CHAIRMAN. Let me see the contract.

Mr. FROST. Yes, sir; and I will say that although the superintendent refused our application, the Interior Department has granted those extensions and has granted them up to date.

The CHAIRMAN. And Dr. White recommended that it should not be granted?



Mr. FROST. That it should not be granted. There is the contract there [indicating]. I do not know as I need to read it all. It is quite long. Maybe I can put my hand on that particular clause of it.

Under clause 4 of the contract it is agreed that no claim shall be made for any loss or damage arising out of the nature of the work to be done, or from any unseen or unusual difficulty that may be encountered in the prosecution of the work; but that if the party of the second part shall be forced, through circumstances beyond its control and by no fault of its own, or shall not be permitted an opportunity to complete the work within the time specified in the contract, such additional time shall be allowed as, in the judgment of the party of the first part, may be just and reasonable, and that such allowance and extension shall in no manner affect the rights of the party of the second part.

The CHAIRMAN. Do you think that the fact that the locks that you had ordered from Barber & Ross were on hand at Barber & Ross's for three months, and you not finding out they were there, was a cause or a circumstance beyond your control?

Mr. FROST. That was comparatively a small item in the showing we made. There were other things, such as failure to get wire.

The CHAIRMAN. Is not your complaint here that you think Dr. White acted in an arbitrary manner toward you and endeavored to prevent your obtaining an extension of time from the Interior Department; Is not that about all it is?

Mr. FROST. That is just a part of the business administration.

The CHAIRMAN. The only business administration that you know anything about is in connection with the installation of this fire alarm, is it not?

Mr. FROST. Yes. I want to state further that as representative he certified that the work had been properly done up to the 21st of June, and that about the middle of November he applied to the Interior Department for the appointment of an expert to go over this work, inasmuch as he had been informed by his electrician that the work had been done in a cheap and slovenly manner.

Mr. SMYSER. Suppose he did. What of it? Would not any ordinarily prudent man in the management of any business, if he had such a matter brought to his attention, do that very thing?

Mr. FROST. I do not want to argue about it. I am giving you facts.

Mr. SMYSER. Well, what if he did?

Mr. FROST. I will show you the application.

Mr. SMYSER. Was it not a prudent thing to do?

Mr. FROST. Just let me get through. I do not know whether it was prudent or not.

The CHAIRMAN. He heard that there was some complaint about this and he asked for an expert electrician to find out, because he was not able to do it himself, not being an expert electrician.

Mr. FROST. He had an expert electrician there under whose orders we had been acting from the start. He had an electrician of his own, a very able man. We had been working under him up to the date when he asked for another electrician to examine the thing.

The CHAIRMAN. As a business man, having heard complaint, notwithstanding that his own electrician had said the thing was all right, still having heard complaint, would not you if you had been in his posi-

tion put on somebody to verify the work or opinion of the electrician?

Mr. FROST. If I had been in his position I should not have waited for a year, having been appointed representative, to see that that contract was properly carried out before I got some one who could properly carry it out. I should have gotten an electrician to start in with and not wait for a year afterwards. His report was——

Mr. SMYSER. One moment. Mr. Chairman, I do not care to sit here and hear a squabble about a contractor unless there is something in it affecting the management of this institution.

Mr. FROST. It is the business management, that is all.

Mr. SMYSER. I do not know anything about business except as I have had to look after other people, but it seems to me that your contention is boiled down to a single proposition. Doctor White did not treat you, as you thought, properly in respect to your business.

Mr. FROST. He did not treat my company right.

Mr. SMYSER. Your company, and then that he put in another electrician. Well, now, I might have done the same thing myself, and many another man might have done it. But unless you have something that actually affects the management of that institution out there I do not think that we ought to sit here and listen to this stuff.

Mr. FROST. In less time than it takes you to say that I can show you the application.

Mr. SMYSER. Well, shoot her off.

Mr. FROST. "In general, we believe that the views of the superintendent and of the electrician at the hospital"—I am reading from the report of the electrician that Doctor White asked to have appointed a year after his own electrician had——

Mr. SMYSER. I submit, Mr. Chairman——

Mr. FROST. "In general, we believe——"

Mr. SMYSER. One moment. If the committee considers that this is at all relevant I am willing to sit here and hear it.

Mr. HAY. Let him go on.

The CHAIRMAN. Go on.

Mr. FROST. "In general, we believe that the views of the superintendent, and of the electrician at the hospital, that the work is being done 'in a slovenly, cheap, and careless manner, with the use of cheap labor and material' are sustained by the investigation."

That is the report of the electrician from the Treasury Department that Doctor White had appointed. I answered that by sending to all of the establishments in the country and proving that it was not so, and the Acting Secretary of the Department, Mr. Ryan, appointed a committee consisting of Arthur B. James, J. U. Burket, and R. M. Klein, men whose business it is to know about those things, and they made another report after a careful investigation, saying that they had gone all over it and the material and workmanship was good, and the Interior Department then appointed another representative in Doctor White's place, and we are now sailing on comparatively smooth water.

The CHAIRMAN. We will now swear the sergeant-at-arms.

## TESTIMONY OF FREDERICK N. WEBBER.

FREDERICK N. WEBBER, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. You served the subpoena upon Mr. Frost, did you not, Mr. Webber?

Mr. WEBBER. Three of them.

The CHAIRMAN. How did you do it?

Mr. WEBBER. By the usual manner, by leaving them at his place of business, where the clerk accepts the same with the statement that it is his place of business, that he is not there, but will return during the day. That is the way it is done with all business men.

The CHAIRMAN. When did you leave these?

Mr. WEBBER. I left one on May 10 on the fifth floor of the Corcoran Building; again on the 15th, it having been insisted that he should be present. The first return was made to the effect that he was in Baltimore. The second return we went back and a young fellow was there in charge, sitting at a table. I asked him if Mr. Frost was in the city and he said yes. I said, "When will he be in?" He said he would be in in an hour or two. I said, "Where does he reside?" He says, "I don't know." I said, "Can you not tell me where he lives." He said, "I can not." I said, "Will he be in this afternoon." He said, "He will." I said, "Will you give him this service when he comes and tell him that the committee desires his presence to-morrow morning at 10 o'clock." He said, "I will."

I then left the second one. Day before yesterday the committee again ordered Mr. Frost returned to the committee and I went to the Corcoran Building again. The young man took the service and said that Mr. Frost had been in and would return again in an hour or two. He said that he would see that he got it and I left it. I asked him to answer, but there was no answer to the summons this morning, and I went again on the order of the committee yesterday, as Mr. Frost was desired to come, in view of Unsworth's testimony. I told the young man that Mr. Frost understood, as a Government contractor, that he should answer the service and not evade it; that the service had to be respected and that he would get into trouble with the marshal's office if he did not come. The young man said, "What is the matter?" I said, "One of his employees gave some testimony yesterday and they want him to testify in relation to the matter." I then telephoned to the insane asylum, understanding that he was at work there testing his national automatic fire alarm in connection with Mr. Burket, that Mr. Frost was to be told that he must answer the summons and appear here this morning. That is the nature of the three services.

The committee (at 12.20 o'clock p. m.) took a recess until 2 o'clock p. m.

## AFTER RECESS.

The committee reassembled at the expiration of the recess.

## TESTIMONY OF INA V. HOTCHKISS.

INA V. HOTCHKISS, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Do you live in the city of Washington?

Miss HOTCHKISS. Yes, sir.

The CHAIRMAN. You have a sister who is a patient in St. Elizabeth's?

Miss HOTCHKISS. I have.

The CHAIRMAN. How long has she been there?

Miss HOTCHKISS. For several years.

The CHAIRMAN. How did she come to go there; was she sent at the suggestion of you or other members of her family?

Miss HOTCHKISS. Yes.

The CHAIRMAN. Was she regularly committed by any court proceedings?

Miss HOTCHKISS. She was.

The CHAIRMAN. Do you know specifically what was the matter with her?

Miss HOTCHKISS. I do not.

The CHAIRMAN. She was not in her right mind and that is the reason she was committed there, I suppose; was it not?

Miss HOTCHKISS. Yes, sir.

The CHAIRMAN. Do you know upon whose application she was admitted or who made the suggestion that she go over there to the asylum?

Miss HOTCHKISS. My mother.

The CHAIRMAN. Your mother signed the petition?

Miss HOTCHKISS. I suppose so. At that time I knew nothing about the plan of getting a patient into St. Elizabeth's.

The CHAIRMAN. It was at your mother's suggestion, I suppose, and she was advised by some physician that she should be sent to the institution?

Miss HOTCHKISS. Yes; she saw Doctor Godding about it.

The CHAIRMAN. Was Doctor Godding connected with the hospital at that time?

Miss HOTCHKISS. He was the superintendent.

The CHAIRMAN. And she has been there ever since?

Miss HOTCHKISS. Yes, sir.

The CHAIRMAN. Do you go to the hospital frequently?

Miss HOTCHKISS. On an average of twice a week and often three or four times a week.

The CHAIRMAN. Whereabouts in the institution is your sister?

Miss HOTCHKISS. At present I think she is in Q Building. She was there when I was up on Tuesday of this week.

The CHAIRMAN. Has she been in the same place for a considerable length of time?

Miss HOTCHKISS. Do you mean in Q Building?

The CHAIRMAN. Yes.

Miss HOTCHKISS. She has been there back and forth. At first she was in K building, and then transferred to Q building, and then back to K building, and then back to Q building.

The CHAIRMAN. Is she mentally very much disturbed?

Miss HOTCHKISS. I don't know how to answer that question.

The CHAIRMAN. I mean to ask if she is generally quiet or is she sometimes——

Miss HOTCHKISS. She is very nervous at times.

The CHAIRMAN. So that she is sometimes like a sick person, who is delirious?

Miss HOTCHKISS. No, sir; I mean that she is restless and wants to walk constantly. She has times when she is more disturbed than others. That is the best way I can describe it.

The CHAIRMAN. Does it disturb her when her family goes to see her?

Miss HOTCHKISS. No, sir; she anticipates my coming, if I miss a day or two from my time of going. I go on regular days usually, Tuesdays and Saturdays, and very often on Sundays, unless I go on those days she thinks that some of us are sick. Last week she got very nervous because I did not come the day she expected me. One of the patients told her that some one came into the house and poisoned me and I was dead.

The CHAIRMAN. What is that?

Miss HOTCHKISS. One of the patients told her that some one had come into the house and poisoned me at my own home and that I had died, and that made her disturbed, because she thought I was dead and could not come to see her any more.

The CHAIRMAN. So that when you go to see her, she knows you perfectly?

Miss HOTCHKISS. Yes, sir; we have very pleasant times together.

The CHAIRMAN. Do you stay there for a considerable length of time when you go there?

Miss HOTCHKISS. Sometimes I do and sometimes I do not.

The CHAIRMAN. Do you remember of going there on a particular occasion a little while before Christmas of the last year, during the month of December?

Miss HOTCHKISS. Why, I go every week, twice a week.

The CHAIRMAN. Do you remember any particular occurrence that happened a short time before Christmas of last year, when you were over there calling upon your sister?

Miss HOTCHKISS. No; I don't know of any incident that occurred while I was calling on my sister.

The CHAIRMAN. Do you think the treatment of your sister is good or bad?

Miss HOTCHKISS. I think the treatment of my sister has been excellent, until in the month of December. I have always thought that the doctors and nurses were most kind to Carrie, and were very considerate.

The CHAIRMAN. Who are the doctors who had charge of the ward in which your sister is?

Miss HOTCHKISS. That question I can not answer, because Dr. O'Malley is the visiting physician there and Dr. Clark used to be. I have not seen Dr. Clark on the ward so much of late as I do Dr. O'Malley.

The CHAIRMAN. You usually see Dr. O'Malley when you go there?

Miss HOTCHKISS. I very often see her going back and forth in the ward.

The CHAIRMAN. You say you always thought the treatment of your sister was good until quite recently, that is, six or seven months ago?

Miss HOTCHKISS. Yes, sir; beyond criticism.

The CHAIRMAN. What happened then?

Miss HOTCHKISS. Two of the nurses assaulted my sister, so to speak, by choking and beating her.

The CHAIRMAN. Did you see that done?

Miss HOTCHKISS. No, sir; she told me that.

The CHAIRMAN. Did you ever talk with the doctors about that?

Miss HOTCHKISS. I talked with Dr. Clark, because Dr. White was out at the time, and the next day he was out of town.

The CHAIRMAN. Did you ever talk with Dr. O'Malley about that?

Miss HOTCHKISS. No, sir; because that happened just about the time, I think, that Doctor O'Malley came to the institution, or shortly afterwards, and at that time I had not met Doctor O'Malley personally.

The CHAIRMAN. Do you know what were the names of the nurses whom your sister said assaulted her?

Miss HOTCHKISS. Yes, sir; Miss Thorn and Miss Edwards.

The CHAIRMAN. Had they been the nurses for your sister for a considerable length of time?

Miss HOTCHKISS. Let me see—I don't remember whether they were on that ward when Carrie was moved into the K ward, when they left the old building or not. I don't remember whether Miss Thorn and Miss Edwards were on that ward or not.

The CHAIRMAN. Did you talk to those two nurses about it when your sister told you about this affair?

Miss HOTCHKISS. I did the next day.

The CHAIRMAN. What did they say?

Miss HOTCHKISS. When my sister told me about it it was on the Monday after Christmas.

The CHAIRMAN. The Monday after Christmas?

Miss HOTCHKISS. Yes, sir.

The CHAIRMAN. What did they say when you talked to them about it?

Miss HOTCHKISS. "I did not talk to Miss Thorn about it at all. I asked Miss Edwards if she——"

The CHAIRMAN. Which Miss Edwards was it? I think there are two of them.

Miss HOTCHKISS. She gave me her full name at the time, but I am not sure what her given name was. She is a dark-complexioned girl and has a slight curvature of the spine, I think, because she carries her head a little to one side.

The CHAIRMAN. What did Miss Edwards say?

Miss HOTCHKISS. She denied that she had choked or beaten Carrie. At first she said she was terribly frightened, and I must see she was terribly frightened about it. She denied that she had beaten her or that Miss Thorn had done it, but she confessed to having one of the roller towels with her that Carrie said they put around her neck and choked her with; but she said she didn't use it on her. Then she said: "I held Carrie's hand, but I didn't choke her." Carrie said one

of them held her hands and the other choked her until she fell on the floor, and then they beat her and pulled her hair.

The CHAIRMAN. Your sister told you, at one time when you did not come there, that some patient said that you had been poisoned?

Miss HOTCHKISS. This was just last week.

The CHAIRMAN. Of course, you know that that was not true?

Mr. HAY. Some other patient told her that.

Mr. OLCOTT. Yes, I understand, and your sister told you?

Miss HOTCHKISS. Yes.

The CHAIRMAN. Of course you know that was not true. Did it ever occur to you that perhaps your sister had, unwittingly, not told the truth to you in regard to her treatment by these nurses? Was there any sign on her body of such treatment?

Miss HOTCHKISS. Yes, sir; on her throat.

The CHAIRMAN. How did her throat look?

Miss HOTCHKISS. You see this occurred on Thursday before Christmas, and I did not go over there Thursday or until Christmas day, because I was very busy getting out my Christmas packages. On Christmas day my sister said: "I will go up and visit Carrie and relieve you because you have been over there so much this winter, and you can finish getting out the remainder of your packages and go up during the week to see her." So she did go, and when she had been there long enough to have had this conversation with Carrie, she 'phoned me to come up; that something had happened to Carrie. Then I went up, and Carrie told me what had occurred and showed me the mark on her throat, and said that her throat pained her so for two or three days that she could scarcely eat.

The CHAIRMAN. What kind of a mark was it?

Miss HOTCHKISS. It was a terrible mark right here [indicating], about the size of the end of one's thumb that cut just as if she had taken her thumb that way [indicating] and cut into her throat—just a certain line of the thumb nail, and it was purple underneath it.

The CHAIRMAN. Did you ever talk with Dr. Clark about this?

Miss HOTCHKISS. That day I saw Dr. Clark. Carrie was very much excited and in a highly nervous state, and she said: "I am afraid to go back into the house unless you see Dr. Clark and Dr. O'Malley." Dr. O'Malley was off for the day in town, so I was told, and I waited until I saw Dr. Clark. I told him about it, and he said he would have a talk with the nurses the next day.

The CHAIRMAN. Did he ever speak to you about it again?

Miss HOTCHKISS. The next day I went to see him about it, and then we had a conversation.

The CHAIRMAN. What did he then say?

Miss HOTCHKISS. We had quite a lengthy conversation and he said that he would tell those nurses they must not do anything of that kind again or they would be discharged.

The CHAIRMAN. Did he say that he had made the investigation and tell you the result of the investigation?

Miss HOTCHKISS. Not at that time, because he had not had time. You see it was 6 o'clock in the evening before Christmas day and I went on Tuesday, the day following Christmas, if Christmas was on Monday. Then he said he would investigate it and have a conversation with these nurses on the subject.

The CHAIRMAN. When you saw him the next time did he say he had investigated it?

Miss HOTCHKISS. I think I went the very next day. I did go the next day and he said that he had investigated it and he would transfer the nurses to another ward.

The CHAIRMAN. Were the nurses transferred?

Miss HOTCHKISS. Yes, sir.

The CHAIRMAN. Did he say that he believed the story that your sister told?

Miss HOTCHKISS. He said in this way: "That of course the testimony of a person of unsound mind is not always to be relied upon, and that, in fact they had hallucinations for different reasons, but that the superintendent and the staff of physicians usually showed favoritism on the part of the patients to the nurse; in other words, they would give the benefit of the doubt to the patients instead of the nurses. He said that while he had no witnesses that the nurses had illtreated Carrie, that is, no eyewitness to it, he believed it probably was so, or something to that effect, and he would have those nurses transferred, which he did.

The CHAIRMAN. Did he tell you that he believed this story was true?

Miss HOTCHKISS. No; he did not say whether he believed it was true or not.

The CHAIRMAN. He merely said that if the patient honestly thought she had been illtreated by the nurses, in order to avoid any possible trouble he would transfer the nurses?

Miss HOTCHKISS. Yes.

The CHAIRMAN. And substitute other nurses, against whom your sister had no feelings?

Miss HOTCHKISS. Yes; he said there are some nurses who have been with Carrie a great deal and know all her ways and I think they will get along with her nicely, and I have put them on the ward.

The CHAIRMAN. He did that; did he?

Miss HOTCHKISS. He tried to fix it so that I think Carrie will not have any more trouble and this thing will not occur again.

The CHAIRMAN. Who are the nurses on the ward now?

Miss HOTCHKISS. Carrie is transferred now. She is on Q ward.

The CHAIRMAN. Do you know what nurses were put on this ward after this trouble?

Miss HOTCHKISS. Miss Stewart and—I can not think of the other nurse's name; but I may think of it before we finish this conversation.

The CHAIRMAN. Did they, so far as you know, take good care of your sister?

Miss HOTCHKISS. Yes, sir.

The CHAIRMAN. Did you ever have an interview with Miss Edwards herself?

Miss HOTCHKISS. I did on that occasion.

The CHAIRMAN. Was anybody with you?

Miss HOTCHKISS. Yes, sir.

The CHAIRMAN. Who was it?

Miss HOTCHKISS. My attorney.

The CHAIRMAN. Who was he?

Miss HOTCHKISS. Lemual Fugitt—this gentleman here [indicating].



The CHAIRMAN. Did Doctor Clark say anything else to you as to why the nurses would not be immediately discharged?

Miss HOTCHKISS. He said in this way: Miss Thorn was suspended some time ago. I won't undertake to say when, because I don't think he gave me any dates. Then she was taken back on good behavior, so to speak. Then there was a second offense reported against her. They keep what they call a black book and have recorded these two instances in this black book, and when they have gotten a third report against her for misconduct she will be discharged from Government employ.

The CHAIRMAN. Do you know whether or not she is now in the institution?

Miss HOTCHKISS. I do not.

The CHAIRMAN. You have not seen her since then?

Miss HOTCHKISS. I have not seen her since then.

The CHAIRMAN. Did you ever complain to anybody else at the hospital in regard to her?

Miss HOTCHKISS. About Carrie?

The CHAIRMAN. Yes; did you see Miss Fitzpatrick about it?

Miss HOTCHKISS. At the time this occurred, when I was there on Tuesday, I spoke to Miss Fitzpatrick about it. She said to me: "Miss Hotchkiss, I am sorry to hear of this trouble." I said: "Yes; I am very sorry that it has happened. Did you see Carrie's throat?" She said: "No; Carrie spoke to me about it and I am sorry now that I didn't look at it."

The CHAIRMAN. Did your sister ever talk to you, at any time, about any other ill-treatment of herself or anybody else?

Miss HOTCHKISS. She never complained until that time.

The CHAIRMAN. Either about the treatment of herself or of any other patient?

Miss HOTCHKISS. No, sir; I think Carrie was considered, at the institution, as very truthful and it is because of that she is on parole.

The CHAIRMAN. She is what?

Miss HOTCHKISS. She is on parole. She promised Dr. Clark that she would do certain things, keep within certain limits on the ground, if he would permit her to be on parole.

The CHAIRMAN. What do you mean by pay-roll?

Miss HOTCHKISS. She has the freedom of the grounds, to go around the buildings where she wished, within certain bounds.

The CHAIRMAN. I understand. I beg your pardon; I thought you said pay roll. Have you ever seen any instances of cruelty to anybody else yourself?

Miss HOTCHKISS. No, sir; the only thing I have ever seen in St. Elizabeth's was very recently when I was visiting my sister and one of the patients became very much disturbed and very much excited. It seems that she has these excitable spells, and, in fact, she was throwing things about the ward. They undertook to control her and get her into a room. That was the only thing they could do with her, and being short of nurses on the ward they had to use force to get her into the room.

The CHAIRMAN. Did they use more force than was necessary to get her into the room?

Miss HOTCHKISS. No, sir.

The CHAIRMAN. If you were to do the same thing, would you use the same amount of force?

Miss HOTCHKISS. I don't know what I would have done under the same circumstances. It is very hard to tell what one would do. It seems to me they were as gentle as they could be with her, under the circumstances.

The CHAIRMAN. In other words, it was a case where a patient was excitable and disturbed, and it was necessary to control her?

Miss HOTCHKISS. I was there visiting my sister and I had taken her some little articles of food, as I always do when I go—little dainties from home. I had set them out on the bed and this patient ran into the room and commenced to break the dishes I had in the lunch basket. Finally she slammed the door and confined my sister in the room with her. This young girl seemed very much alarmed and afraid of the patient, who was very wild. I was on the outside and she started to run. I said to her: "Don't leave the ward, you have the key; so come back and if you can not manage the patient I will help you until someone comes—don't leave the ward." Then I discovered the patient had shut the door and had fastened Carrie and herself in the room. I said to her: "Unlock the door." She was too excited, and it was quite a time before she could get the door open. The patient was still throwing things out of the window, and as we ran into the room she ran out. By that time they had summoned another nurse, and she helped to put her in this room, so that she would not do any harm to herself or anyone else.

The CHAIRMAN. You think that treatment was proper?

Miss HOTCHKISS. It was the only thing they could do under those circumstances. There was this patient in a state of fury.

The CHAIRMAN. Did you ever have any difficulty about seeing your sister?

Miss HOTCHKISS. Not in the slightest.

The CHAIRMAN. You were able to see her at all proper and reasonable times?

Miss HOTCHKISS. I would go right into the ward. I was given that permission by Dr. Clark and the supervisors. I took a great deal of care of my sister and in order to do it I went in on the ward to see that she had a bath and do various little things for her.

The CHAIRMAN. In other words, they let you assist in her care and you went in and assisted in the care of her when you were there?

Miss HOTCHKISS. I did little things for her that perhaps did not come within the duties of the nurses to perform. I cared for her feet and fingers and gave her scalp treatments and things of that kind. Sometimes I stayed the better part of the day. I would go early in the morning and stay until supper time. In the summer time when it was very hot I would go after supper and take her out for a car ride.

The CHAIRMAN. Your sister is well enough so that you can take her out temporarily?

Miss HOTCHKISS. Yes; I take her out for a day or a half a day.

The CHAIRMAN. When you went there did you eat any meals at the hospital yourself?

Miss HOTCHKISS. No, sir; but the day that Barnum & Bailey Circus was here I took my sister to the circus, and that day I ate dinner

with her, because we were late in getting away and the nurse suggested that Carrie had better have her dinner before she went. She gave her her dinner a little before the other patients and she very kindly invited me into the dining room to dine with Carrie, which I did.

The CHAIRMAN. Was the food satisfactory?

Miss HOTCHKISS. I will tell you what we had. We had that day boiled fish that was very good. We had rice pudding and coffee and bread and butter, or butterine—I suppose I must use the correct word word in this testimony.

The CHAIRMAN. That is all right; I think we will admit they use oleomargarine there.

Miss HOTCHKISS. And we had young onions and potatoes.

The CHAIRMAN. It was a comfortable meal, was it?

Miss HOTCHKISS. Yes, sir; that is the only time since Doctor Godding's time that I have eaten anything in the institution. I have been invited to do so, but I always felt that it would be an intrusion and that I would be taking some one's place, so I have declined.

The CHAIRMAN. I am very glad you did eat a meal there. I do not consider it an intrusion at all.

Mr. WALLACE. Did you ever see two nurses choke a female patient?

Miss HOTCHKISS. No, sir.

Mr. WALLACE. You never saw anything of that kind?

Miss HOTCHKISS. No, sir; only as I say at this time when this patient was uncontrollable and they tried to get her into this room. One of the nurses pushed her and one of them called out "Be careful, she will bite you." She put her hands around her neck in this way [indicating] but she didn't do it cruelly. It looked to me like she did it to hold her head so that she couldn't bite any one. That is all I have seen. I have never had cause to complain of anything whatever in the years I have been going to St. Elizabeth's.

Mr. WALLACE. Did you take an attorney over there to see Dr. Clark?

Miss HOTCHKISS. I did.

Mr. WALLACE. What was your purpose?

Miss HOTCHKISS. When Carrie told me that these girls had choked her and beaten her I had the same purpose in taking my attorney there that I would if any one had assaulted my sister who is well and at home. I would take my attorney to investigate as to a case of assault.

Mr. WALLACE. You wanted to investigate it?

Miss HOTCHKISS. Yes; at that time I had not met Doctor White. Saturday before Easter I met Doctor White, and he told me that when I wanted to enter any complaint or anything of that kind to come to him, which I shall do if I have any occasion to; but I do not think I shall. I have received nothing but courtesy and consideration from the superintendent and supervisors.

Mr. WALLACE. That has been the treatment of you?

Miss HOTCHKISS. Yes.

(Miss Susan H. Hotchkiss, who has been subpoenaed to appear before the committee and is not here, is excused from attendance by order of the committee.)

## TESTIMONY OF LEMUEL H. FUGITT.

LEMUEL H. FUGITT, being duly sworn, was examined and testified as follows:

The CHAIRMAN. You are an attorney at law, practicing here in the city of Washington?

Mr. FUGITT. Yes, sir.

The CHAIRMAN. You have been a practicing lawyer for a considerable length of time?

Mr. FUGITT. Yes, sir.

The CHAIRMAN. You have heard the testimony of Miss Ina V. Hotchkiss?

Mr. FUGITT. Yes, sir.

The CHAIRMAN. You are the gentleman she speaks of as having gone to the hospital to interview Dr. Clark and Miss Edwards?

Mr. FUGITT. Yes, sir.

The CHAIRMAN. Will you be kind enough to state what occurred at the time you had that interview with Dr. Clark and Miss Edwards?

Mr. FUGITT. When I first went to the institution I called for Dr. White, but I understood that he was not there. Then I called for Dr. Stack. I am well acquainted with him, as we were in the same medical class at Georgetown School, and I was acquainted with him before he went to the institution and before he graduated in medicine. We were friends then and have been friends ever since. I first saw Miss Carrie Hotchkiss. I met her out in the grounds, and my impression is that I saw her first. She told us what these two nurses had done, as Miss Hotchkiss has testified to, and the way they treated her with a towel, and she showed us her throat. I remember now there were some discolorations and what might have been finger prints. We then went in and first saw Dr. Stack. After talking with him he called Dr. Clark and we reported to him. Then I asked him if we could go over and see these two nurses, and he gave us permission. We went over to the ward and saw them and had an interview with the nurses. They said they had the towel but they said they did not use it; that they did not assault her. Then we went back and reported the result of our investigation to Dr. Clark, and I think Dr. Stack was there, too. He said he would investigate it and he would do what was proper in the case. Of course my object in going there was to find out whether these two nurses had assaulted that girl. There was no complaint against the institution at all.

The CHAIRMAN. You went there not only as an attorney but as a friend?

Mr. FUGITT. Yes; as a friend. I have known them since the death of their father. My object was to have these two nurses arrested and have them punished, if they had assaulted this patient. That was the object of my investigation.

The CHAIRMAN. Were any proceedings taken?

Mr. FUGITT. No; we could not get any evidence outside of the girl's own statement. There was no evidence that would sustain any charge in a court of justice.

The CHAIRMAN. Have you been over to the institution frequently?

Mr. FUGITT. No, sir; not of late years.

The CHAIRMAN. Your acquaintance with Dr. Stack has continued?

Mr. FUGITT. Yes; I have been acquainted with the institution, of

course, since my infancy. I was brought up here in the District and I know it back in the time of Dr. Nichols.

The CHAIRMAN. Have you visited the institution frequently?

Mr. FUGITT. Not lately. I formerly did, but not of late years; not since Dr. Clark's time.

The CHAIRMAN. That is really all you know of this matter?

Mr. FUGITT. That is all, sir.

#### TESTIMONY OF JOHN HODGES.

JOHN HODGES, being duly sworn, was examined and testified as follows:

The CHAIRMAN. You are an employee at St. Elizabeth's now, I believe?

Mr. HODGES. Yes, sir.

The CHAIRMAN. What is your position there?

Mr. HODGES. I am night watchman there in the convict building.

The CHAIRMAN. That is Howard Hall?

Mr. HODGES. Yes, sir; and in the annex. But there are not convicts in the annex.

The CHAIRMAN. At what time do you go on duty?

Mr. HODGES. I go on duty at half-past 8 o'clock and come off at 6.

The CHAIRMAN. What are your duties during the night?

Mr. HODGES. I make a round through the buildings to Howard Hall every half hour and I go to the annex every hour. I am supposed to look after the general wants of the patients during the night to see if they want water, and give the medicine that is prescribed by the night doctor, and to see that none of them get away.

The CHAIRMAN. Are you the only man there at night?

Mr. HODGES. No, sir; I have an assistant there in the sick ward—hall 1.

The CHAIRMAN. He is there all night?

Mr. HODGES. He is in that one ward.

The CHAIRMAN. How many wards do you control?

Mr. HODGES. I go through eleven wards, nine wards in Howard Hall and two in the annex.

The CHAIRMAN. In other words, you control them all?

Mr. HODGES. Yes, sir; and if there is anything wanted I am there to give assistance. The greatest trouble we have is to keep these patients from getting away, getting out, unscrewing the guards or something of that kind. That is what I am most particular about. We have men sent right there from the jail and the penitentiary.

The CHAIRMAN. Do you live at the hospital?

Mr. HODGES. No, sir; I live at Congress Heights, in the District.

The CHAIRMAN. You do not get your meals there?

Mr. HODGES. I get my meal there at night at 12 o'clock. I can get all my meals there if I want them. I generally get to bed at half past six o'clock in the morning and I only eat two meals in 24 hours, one at home and one at the hospital.

The CHAIRMAN. Did you ever see a fight there between two attendants?

Mr. HODGES. Yes, sir.

The CHAIRMAN. When was that?

Mr. HODGES. That was about three months ago.

The CHAIRMAN. Who were the attendants?

Mr. HODGES. Browning and Greene.

The CHAIRMAN. Tell us about what happened.

Mr. HODGES. Well, these boys came in a little full that night. They had been out to a reception and, as I stated to the Doctor at the time, it was not them but it was really the wine fighting instead of them. Both of them are perfect gentlemen when they are sober. They drank a little too much and had an argument. I came through the upper dining room and found them fighting.

The CHAIRMAN. Were there any patients there at the time?

Mr. HODGES. No, sir; they were all asleep.

The CHAIRMAN. Were these men on duty?

Mr. HODGES. No, sir.

The CHAIRMAN. They had gone into the dining room to continue the discussion?

Mr. HODGES. They had to pass through this dining room and there they separated, one goes this way and one that. I suppose in bidding each other goodby they couldn't stand it any longer.

The CHAIRMAN. When did you say this took place?

Mr. HODGES. About three months ago.

The CHAIRMAN. What did you do; did you try to separate them?

Mr. HODGES. I tried to separate them; yes. But when I tried to separate them they both went to the telephone and were about to pull it down to keep me from reporting the matter to Dr. Hough, who was the physician in charge that night. Both of them were satisfied to stop fighting as soon as they found out the doctors were going to know about this thing.

The CHAIRMAN. Did you report it to the doctor?

Mr. HODGES. I reported to the doctor at once. He came right down there and had a talk with them—Dr. Hough.

The CHAIRMAN. Were those men disciplined in any way, so far as you know?

Mr. HODGES. They were brought before Dr. White the next morning and he reprimanded them and took away their 12 o'clock night from them for one month.

The CHAIRMAN. That did not in any way interfere with the care of the patients?

Mr. HODGES. Not a bit, sir.

The CHAIRMAN. You say they had been good men?

Mr. HODGES. They were fine men. They are the finest attendants we have got in there. Attendants like them are hard to get. The boys were a little off that night.

The CHAIRMAN. If you had been the superintendent you would not have treated them any worse than Dr. White did?

Mr. HODGES. Not a bit, sir; because, as I say, it is a hard matter to get men like them.

The CHAIRMAN. What do you think, generally, about the food there?

Mr. HODGES. Why, the food is splendid in my estimation. I only wish that my wife and children could get as good. I eat one meal a day in the hospital and I keep in good condition. I weigh

215 pounds. I weigh out of proportion, so that I can't pass the examination for the police force.

Mr. WALLACE. You only eat one meal a day there?

Mr. HODGES. Only one meal a day. We have a splendid meal there at 12 o'clock at night.

Mr. WALLACE. You do not eat any at home?

Mr. HODGES. I eat supper at home in the afternoon. I only eat two meals a day, and that is really too much. Sometimes I don't eat any supper at home. I fill up good at night at the hospital and that will run me.

Mr. WALLACE. Did you eat at the patients' table?

Mr. HODGES. No, sir; I eat at the employees' table. There are no patients up at night after 9 o'clock.

Mr. WALLACE. Mr. Chairman, I have a letter here which I would like to have made a part of the record.

The letter referred to is as follows:

[Central State Hospital, William F. Drewry, M. D., superintendent.]

PETERSBURG, VA., May 25, 1906.

Dr. C. M. EMMONS,

303 Seventh street, NW., Washington, D. C.

DEAR DOCTOR: Yours of the 23d received. In reply to your inquiry regarding the use of mechanical restraint at the institution, I beg to say that for a number of years past we have not used on any patients in this institution any strait-jackets, muffs, cuffs, or any kind of restraining apparatus. We have about 1,200 patients, all of whom are legally committed to this hospital as insane. Occasionally violent patients are put in their rooms; this, however, is very seldom done. For instance, during the last three or four months, out of about 600 male patients, only about two or three have been thus treated, and in each instance it was only for a short time. In the female department, the number of those required to be kept in their rooms at intervals on account of being destructive, violent, etc., is slightly in excess of that of the males.

With much respect, I am, hastily, but

Very truly, yours,

W. F. DREWRY.

The CHAIRMAN. At the request of Dr. White I will have made a part of the record the list of the consulting staff of the hospital and the roster of inspection by the board of visitors.

The papers referred to are as follows:

*Consulting staff, Government Hospital for the Insane.*

*Internal medicine.*—Dr. S. S. Adams, Dr. G. W. Cook, Dr. Sterling Ruffin, Dr. James D. Morgan.

*General surgery.*—Dr. J. Ford Thompson, Dr. J. Ford Johnson, Dr. G. L. Vaughan, Dr. W. C. Borden, Dr. W. P. Carr.

*Gynecology.*—Dr. Jos. Taber Johnson, Dr. H. L. E. Johnson, Dr. J. W. Bovee, Dr. I. S. Stone.

*Ophthalmology.*—Dr. Swan M. Burnett, Dr. D. K. Shute, Dr. W. K. Butler, Dr. E. O. Belt.

*Laryngology.*—Dr. C. W. Richardson, Dr. J. J. Richardson, Dr. W. A. Wells, Dr. F. T. Chamberlin.

*Genito-urinary diseases.*—Dr. E. F. King, Dr. Wallace Neff.

*Medical zoology.*—Dr. C. W. Stiles, Dr. Thomas A. Claytor.

*Bacteriology.*—Dr. W. B. French, Dr. H. D. Geddings.

*Government Hospital for the Insane—Roster of inspection by the board of visitors, 1905-6.*

October 3. Annual meeting. November 7. Messrs. Maury, Moore, Gunnell. December 5. Messrs. Hamlin, Wyman, Mrs. Hubbard. January 2. Messrs. Magruder, Kaufman, Moore.

February 6. Messrs. Maury, Gunnell, Mrs. Gangewer. March 6. Messrs. Gunnell, Kauffman, Wyman. April 3. Semiannual meeting. May 1. Messrs. Magruder, Hamlin, Mrs. Hubbard. June 5. Messrs. Wyman, Moore, Mrs. Gangewer. July 3. Messrs. Hamlin, Gunnell, Kauffman. August 7. Messrs. Magruder, Maury, Mrs. Gangewer. September 4. Messrs. Hamlin, Gunnell, Mrs. Hubbard.

The committee thereupon, at 3 o'clock p. m., adjourned until Monday, June 11, 1906, at 10 o'clock a. m.

WASHINGTON, D. C., *June 11, 1906.*

The committee met at 10 o'clock a. m.

Present: Mr. Smyser (acting chairman), Mr. Barchfeld, Mr. Hay, and Mr. Wallace; also, Dr. White, Mr. Evans, Dr. Emmons, and others.

**TESTIMONY OF MRS. AUGUSTA E. KELLOGG.**

Mrs. AUGUSTA E. KELLOGG, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. Where do you live?

Mrs. KELLOGG. I live at present at Anacostia.

The ACTING CHAIRMAN. You were subpoenaed here as a witness, were you?

Mrs. KELLOGG. Yes, I received it this morning.

The ACTING CHAIRMAN. I suppose it has something to do with St. Elizabeth's?

Mrs. KELLOGG. Yes, I expect so.

The ACTING CHAIRMAN. Were you ever an employee there?

Mrs. KELLOGG. No.

The ACTING CHAIRMAN. Were you an inmate?

Mrs. KELLOGG. No. My son is there, and I go every day to take care of him—William V. Kellogg, a contract surgeon in the United States Army.

The ACTING CHAIRMAN. He is an inmate?

Mrs. KELLOGG. Yes, sir.

The ACTING CHAIRMAN. How long have you been going there?

Mrs. KELLOGG. Two years in October.

The ACTING CHAIRMAN. Ever since Doctor White has been there?

Mrs. KELLOGG. Yes, sir.

The ACTING CHAIRMAN. What ward is your son in?

Mrs. KELLOGG. He is at present, I think, in B 3.

The ACTING CHAIRMAN. Do you go there daily?

Mrs. KELLOGG. I go there daily.

The ACTING CHAIRMAN. What time of the day do you go?

Mrs. KELLOGG. I am there by 10 o'clock and I never leave until after half past six, and on Sundays I remain until eight. Every day for a year I have never missed one day, and in two years only a few weeks when I was ill.

The ACTING CHAIRMAN. How is your son treated there?

Mrs. KELLOGG. My son has received the best of treatment. He is under Doctor Stack, and I can not say enough for the kindness he has received from him—and myself, too. I am the widow of an army officer, Col. William L. Kellogg, Fifth Infantry. He is dead, and this son is my only living child.



The ACTING CHAIRMAN. And being alone you go there daily?

Mrs. KELLOGG. Yes, sir.

The ACTING CHAIRMAN. Is your son in such a condition that he knows you?

Mrs. KELLOGG. Yes, sir; he knows me; but he is like a child 18 months old. He lost his health in the Philippines.

The ACTING CHAIRMAN. And what would you say as to the treatment of other patients, from what you have observed?

Mrs. KELLOGG. From my standpoint they have been very well treated. Of course, I am there all the time, and they see me and know I am there. I have been very fortunate in the wards I have been in. Of course, I know nothing of the outside at all. I try to attend to my own business. That is the only way I can get along, and I do not interfere with them.

The ACTING CHAIRMAN. Have you witnessed anything in the nature of cruelty?

Mrs. KELLOGG. I have never witnessed anything myself; never.

The ACTING CHAIRMAN. And generally, from your observation, how do the attendants treat the patients?

Mrs. KELLOGG. From my observation the attendants I have been with have treated them very well indeed. Of course, there are some of them that are too young, to my idea; but that is all—that they have not the discretion.

The ACTING CHAIRMAN. The discretion that comes with age?

Mrs. KELLOGG. Yes, sir; and the sympathy.

The ACTING CHAIRMAN. How is the food?

Mrs. KELLOGG. Well, the food that we get is very good—very good. There is a great sameness, no variety, but my son is in that condition that it does not make much difference to him, and he eats very well—he has such a good appetite.

The ACTING CHAIRMAN. If you had observed anything there you would not hesitate to tell us, would you?

Mrs. KELLOGG. Not one minute, not one minute. But I have not observed anything. I have never seen any cruel treatment. Of course, what goes on in other places I don't know—and at night. I leave my son at night, and of course I am always anxious.

The ACTING CHAIRMAN. I believe I do not care to ask anything more.

Mr. HAY. Have you ever been in any other ward than the ward your son is in?

Mrs. KELLOGG. My son has been in three wards—first Oak ward, and B 1, and B 2, and B 3.

Mr. HAY. And you have the same to say about all of these?

Mrs. KELLOGG. I have the same to say about all. That is my experience.

(Mr. Olcott, chairman, entered.)

#### TESTIMONY OF POLICE SERGEANT WILLIAM T. ANDERSON.

Police Sergeant WILLIAM T. ANDERSON, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Anderson, are you a member of the police force here now?

Mr. ANDERSON. Yes, sir.

The CHAIRMAN. Were you ever connected with St. Elizabeth's?

Mr. ANDERSON. I left there thirty-three years ago.

The CHAIRMAN. You what?

Mr. ANDERSON. I say I left there thirty-three years ago. I went to work there in 1865 and I left, I believe, in 1872.

The CHAIRMAN. Do you know anything about the condition of the asylum since October, 1903?

Mr. ANDERSON. Nothing of any special interest to this committee that I can think of.

The CHAIRMAN. Have you been in the habit of visiting there?

Mr. ANDERSON. I have charge of the police station out there, and I ride through the grounds and talk to the doctors occasionally and other officials, passing about there on my usual rounds.

The CHAIRMAN. Do you see the patients of the hospital from time to time?

Mr. ANDERSON. I frequently see them; yes, sir; walking about. I never go through the institution unless I go to see some of the officials on business or something like that. I never go through any of the wards.

The CHAIRMAN. Have you ever had, by reason of your position on the police force, any official connection with St. Elizabeth's?

Mr. ANDERSON. The men under my command have been called upon to arrest persons there that have violated some of the District ordinances or laws of the United States.

The CHAIRMAN. Was there ever any board of any kind connected with St. Elizabeth's that you were a member of?

Mr. ANDERSON. No, sir.

Mr. HAY. Were you not on some kind of a board to pass on something out there?

Mr. ANDERSON. No, sir. I have been passing upon police matters for thirty-three years, and that exclusively.

Mr. HAY. You never were on any board that had to pass upon any subject that had anything to do with the hospital?

Mr. ANDERSON. Never in my life. I worked there as assistant engineer at one time.

Mr. HAY. Have you been called upon by the people out there in any criminal case?

Mr. ANDERSON. Well, I have been called upon to arrest persons for assaulting patients and such matters as that.

Mr. HAY. Were you ever called upon to arrest anyone for an assault upon any employee out there?

Mr. ANDERSON. Yes; I call to mind one case of a woman, I think—her husband, I believe, came to my station one evening and spoke of a case.

The CHAIRMAN. How recently was that?

Mr. ANDERSON. How is that?

The CHAIRMAN. When did it happen?

Mr. ANDERSON. Possibly within a year or two—possibly a year ago. I did not charge my memory very especially with the time.

Mr. HAY. Did they complain against some employee at the asylum?

Mr. ANDERSON. Yes.

Mr. HAY. What became of that case?

Mr. ANDERSON. I don't know. I advised two things in the matter, two means of adjustment. One was that if the party wished noto-

riety about it, and to make a court case about it, they would have to go to the police court and apply for a warrant for ordinary assault; and if they did not care to do that, to report the matter to Dr. White, and he would adjust it, possibly, in his own way there.

Mr. HAY. Did you ever have any talk with the superintendent in regard to this case?

Mr. ANDERSON. No; I think not. I do not remember.

Mr. HAY. Or did the superintendent come to the station house and talk to you about it?

Mr. ANDERSON. No, sir.

The CHAIRMAN. Who were these people who made the complaint?

Mr. ANDERSON. It was a woman who claimed to have been assaulted.

The CHAIRMAN. She was not a patient in the hospital?

Mr. ANDERSON. Oh, no; she was an employee there; I think a cook. She went there daily, in the mornings, and the circumstances seem to be like this: She was going there, at possibly 5 o'clock in the morning, before daylight at that time of year, and a man by the name of Barrett, she claimed, stopped her on some of the roads leading to the institution after she got into the grounds, and assaulted her. She told him that she was the wrong kind of a woman—that he was not looking for that kind of a woman—and to go away and to go about his business. That was her story to me. I told her that she had a case for assault, if she cared to prosecute him. Her husband came, and said that he did not want the notoriety in court, and declined to take out a warrant, which would have been necessary to have made an arrest in this case.

Mr. HAY. You say the superintendent did not have any conversation with you in regard to this case either before or after?

Mr. ANDERSON. That is my best recollection of it. He may have sent some one to me, but personally I do not recollect that he did. I have had several conversations with Dr. White, always of a pleasant nature. He may have talked to me about it, but I have a great many things to deal with, and I do not remember.

Mr. HAY. It did not make any impression upon your mind?

Mr. ANDERSON. It made no especial impression upon my mind. I would not say positively that he did not talk to me about the case.

Mr. HAY. What is your opinion as a person who has been out there and who has seen what has been going on at that institution in a general way in your capacity as a police officer and as a citizen? What is your opinion as to the general conduct of the institution?

Mr. ANDERSON. I believe that the institution is conducted probably as well as any other large institution can be. That is my observation of it. It is a growing affair, and a very large affair.

Mr. HAY. Do you know a man out there who is superintendent of the laundry, and whose name is Maenche?

Mr. ANDERSON. No, sir; I do not know him. All I know about him is what I have been reading about him.

Mr. HAY. You never had occasion to deal with him as a police officer?

Mr. ANDERSON. No, sir; I do not think he ever fell into my hands. Many others have, but I do not believe I ever got him.

The CHAIRMAN. I guess that is about all.

## TESTIMONY OF C. R. BROWN.

C. R. BROWN, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you connected with the police force of the District?

Mr. BROWN. Yes, sir.

The CHAIRMAN. How long have you been on the force?

Mr. BROWN. I was appointed on the force this coming November, the 17th, will be three years.

The CHAIRMAN. Where is your precinct?

Mr. BROWN. No. 5. That is in Anacostia.

The CHAIRMAN. And St. Elizabeth's is in the boundaries of the precinct?

Mr. BROWN. Yes, sir.

The CHAIRMAN. Do you know a man named Maenche?

Mr. BROWN. I do, sir.

The CHAIRMAN. What do you know about him?

Mr. BROWN. I don't know of anything special about him. I know him when I see him.

The CHAIRMAN. Did you ever arrest him?

Mr. BROWN. No, sir.

Mr. SMYSER. Did you ever see him when he ought to have been arrested?

Mr. BROWN. No, sir.

The CHAIRMAN. Did you ever see him drunk?

Mr. BROWN. No, sir.

The CHAIRMAN. Or disorderly or anything of that kind?

Mr. BROWN. No, sir.

The CHAIRMAN. You never threatened to arrest him on any occasion, or anything of that kind, did you?

Mr. BROWN. No, sir; not at all.

The CHAIRMAN. Did any complaint come to you at all in regard to him?

Mr. BROWN. No, sir; no one ever complained to me about any misconduct of his.

Mr. SMYSER. How frequently would you see Mr. Maenche, and where?

Mr. BROWN. I saw him frequently. I used to do duty in Hillsdale, out of Anacostia there, and I would see him passing to and fro to the hospital, and I have seen him on many occasions and spoke to him. He always seemed to me to be very friendly and genteel. I never had any occasion to notice anything about him.

Mr. SMYSER. Gentility, perhaps, does not include drunkenness. Did you ever see him when you suspected that he might be under the influence of liquor?

Mr. BROWN. No, sir.

Mr. HAY. Did you ever hear of any occurrence out there of his being put out of the fruit stand by a man named Soper?

Mr. BROWN. I believe I have heard of that, sir. I knew Mr. Soper very well, and I believe I noticed yesterday in the papers that he testified that he put him out of his place of business.

Mr. HAY. Before you saw it in the papers had you ever heard of it?

Mr. BROWN. No, sir; I never did.

Mr. HAY. And neither Mr. Soper nor Mr. Maenche made any complaint to you?

Mr. BROWN. No, sir.

Mr. HAY. At the time was any complaint made at the police station as far as you know?

Mr. BROWN. No, sir; there has never any complaint come into the station in regard to his misconduct.

Mr. SMYSER. Mr. Soper is not a fellow who would be likely to keep that to himself, is he?

Mr. BROWN. Sir?

Mr. SMYSER. Do you know Mr. Soper very well?

Mr. BROWN. Pretty well. I always thought that he was a pretty straight going, straightforward kind of a boy. There is a transfer station there, and for that reason I suppose he came in contact with Maenche frequently, waiting there for the cars.

Mr. HAY. Have you ever talked in any way or to anybody in regard to this man being drunk, or anything of the sort?

Mr. BROWN. No, sir; not to my knowledge.

Mr. HAY. You never talked to a man named Hayes about it?

Mr. BROWN. Charles Hayes?

Mr. HAY. Yes.

Mr. BROWN. Well, I don't remember, sir. I don't remember. He might have said something to me.

Mr. HAY. If he did, you did not say anything to him that would lead him to believe that you had any evidence or knew anything about this man, as to his habits?

Mr. BROWN. No, sir; only what I heard him say. I might have heard him say something about him.

Mr. HAY. You might have heard Mr. Hayes?

Mr. BROWN. Yes, sir—that is, about Mr. Maenche's condition; but I never took much stock in it for the reason that I didn't believe it.

#### TESTIMONY OF NATHANIEL R. HARNISH.

NATHANIEL R. HARNISH, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Harnish, are you employed at St. Elizabeth's now?

Mr. HARNISH. Yes, sir.

The CHAIRMAN. What is your position there?

Mr. HARNISH. I am assistant storekeeper for the time being.

The CHAIRMAN. Who is the storekeeper?

Mr. HARNISH. The storekeeper is Mr. Sanger.

The CHAIRMAN. What are you particular duties there?

Mr. HARNISH. To receive all groceries and all china ware and all those things which go to make up a household—and furniture and such like. To receive all those.

The CHAIRMAN. Do you have anything to do with the meats, too?

Mr. HARNISH. No, sir.

The CHAIRMAN. Just the groceries?

Mr. HARNISH. The groceries and the china ware and the furniture and those things. The meat is divided. Mr. French has something to do with the meat. I have nothing to do with it.

The CHAIRMAN. What have you to say in regard to the character of the groceries that come there, that come under your supervision?

Mr. HARNISH. Why, I consider our groceries a good family grocery. There is occasionally times when we may have to send something back, but those things are liable to happen. But I contend they are a good family grocery, what we receive at St. Elizabeth's. Yes, sir.

The CHAIRMAN. Where you find there is anything wrong about them, do you send them back?

Mr. HARNISH. Yes, sir; we certainly do.

The CHAIRMAN. Who do you get most of the groceries from? From people here in the city?

Mr. HARNISH. Yes, and a good many out of town. We get a great many from New York, from Jordan Stabler, and from Hume here, we get a good many groceries.

The CHAIRMAN. Most of the groceries you receive are under contract with the Department?

Mr. HARNISH. Yes, sir; they are all contract goods as a rule.

The CHAIRMAN. Do you have charge of the reception of fruits—fresh fruits? Do you receive those?

Mr. HARNISH. As a rule I do not. We used to have some in the store, such as bananas and oranges, but Dr. White seemed to cut them off. I don't know for what reason.

The CHAIRMAN. You formerly had bananas and oranges, and now you do not have them?

Mr. HARNISH. We haven't had any for sometime. Those things that come from the farm, and around, goes now to the steward, Mr. French, and he takes care of them. Of course we have our regular supply of lemons, as usual. We have to have them; but bananas and oranges we do not have any.

The CHAIRMAN. Do you have anything to do with receiving the fresh fruits, like pears, peaches, and apples?

Mr. HARNISH. No, sir.

The CHAIRMAN. You have not anything to do with that?

Mr. HARNISH. No, sir; Mr. French does that.

The CHAIRMAN. So that so far as you are concerned you do not receive any fruits at all?

Mr. HARNISH. No, sir; as a rule I do not.

Mr. HAY. As to this store, what sort of a store is it? Is it a store where the people use things for the asylum generally, or do you dispose of them to people who come into the store to buy?

Mr. HARNISH. No, sir; it is the store that the Doctor keeps there, or that the Government keeps there, and those things after they are received are ordered off—assigned by the superintendent. Part of the goods are ordered off by the superintendent and part of them by the housekeeper, and then I issue them according to those orders.

Mr. HAY. When you say a store you do not mean a store where people can come and buy?

Mr. HARNISH. No, sir; not at all; certainly not.

Mr. HAY. You mean that it is a storeroom?

Mr. HARNISH. Yes, sir.

The CHAIRMAN. Mr. Sanger is the head of it and you are his assistant. How many others are there?

Mr. HARNISH. Mr. Cropp.

The CHAIRMAN. Do you say that all of the goods that come in there are inspected?

Mr. HARNISH. Yes, sir.

The CHAIRMAN. Do you do most of that work yourself?

Mr. HARNISH. I do the majority of it—Mr. Cropp, my assistant, and I. We do it all.

The CHAIRMAN. Suppose you find some goods that are not up to the standard. What do you do? Do you notify Mr. Sanger?

Mr. HARNISH. No, sir; we report it to Mr. Offutt. We tell him that such and such goods are not right and we have got to send them back. He says, "Well, send them back, certainly, if you think they are not good."

Mr. SMYER. That oftentimes happens, does it not? It even happened yesterday at my house.

Mr. HARNISH. It don't happen very often.

Mr. SMYER. But you do find it?

Mr. HARNISH. Occasionally, certainly. It is reasonable to think that with the quantity of goods we get it would happen.

Mr. SMYER. Did you ever keep house?

Mr. HARNISH. Yes, sir; I am keeping house now.

Mr. SMYER. Does it happen any differently there from the way it does in an ordinary household?

Mr. HARNISH. It is about the same. I had to take a pound of butter back the other day that was not good.

Mr. SMYER. How long have you been there?

Mr. HARNISH. I have been there twenty-three years, sir.

Mr. SMYER. During the last two or three years, outside of your duty as storekeeper, have you nosed around a little to look after any other of the food? The meat, for instance.

Mr. HARNISH. How is that?

Mr. SMYER. Have you nosed around a little to see what kind of meat you were getting?

Mr. HARNISH. No; I do not like to interfere with somebody else's business.

Mr. SMYER. That would not be interfering. That would be a public duty, would it not?

Mr. HARNISH. Well, it might, but I do not do it.

Mr. SMYER. Have you not just kind of kept your left eye open, occasionally, on the meat?

Mr. HARNISH. Well, it is just this way: There has been meat there, but Mr. French has sent it back. I am aware of that.

Mr. SMYER. You saw it yourself?

Mr. HARNISH. Oh, yes; certainly.

Mr. SMYER. Now, you say that was sent back?

Mr. HARNISH. Yes, sir; I do.

Mr. SMYER. What do you say, Mr. Harnish, now, taking the meats that are bad, or that you think are bad, have you any hesitancy in sending them back?

Mr. HARNISH. Why, no; I don't think Mr. French ever had any hesitancy in sending it back.

Mr. SMYER. From what you could see and observe do you try in that regard to manage that institution as an ordinary household would be run? If the meat is not good, or the fish is spoiled, or something of that kind, do you send it back?

Mr. HARNISH. That is the idea; but understand, I do not have anything to do with those things.

Mr. SMYSER. I understand; but from what you see there.

Mr. HARNISH. Yes; certainly.

Mr. SMYSER. I am going on the theory that all men are somewhat alike—that they have not the curiosity women have, but they like to nose in occasionally.

Mr. HARNISH. That is right.

Mr. SMYSER. Now, in that regard, from what you have seen, do they try to manage that institution like an ordinary household would be managed? If the meat is bad, or if it is suspected of being bad, to your knowledge, do they send it back, or do they use it?

Mr. HARNISH. To my knowledge they send it back; I certainly do think.

Mr. SMYSER. Do you know of any disposition to put bad provender on these people out there, either groceries, meats, fruits, or anything else?

Mr. HARNISH. Not to my knowledge, sir.

Mr. WALLACE. Where were you employed before you came to the hospital?

Mr. HARNISH. I came from Massachusetts.

Mr. WALLACE. You were employed up there?

Mr. HARNISH. Yes.

Mr. WALLACE. What is Mr. Sanger's position, and what are his duties?

Mr. HARNISH. His duties are those of storekeeper.

Mr. WALLACE. How many offices has he?

Mr. HARNISH. I think I have got to say two.

Mr. WALLACE. Two?

Mr. HARNISH. Yes, sir.

Mr. WALLACE. How often does he come into the storeroom?

Mr. HARNISH. He comes in the morning, and arrives about 9 o'clock.

Mr. WALLACE. Does he take any active part in the distribution and receiving of goods?

Mr. HARNISH. Not any.

Mr. WALLACE. Who compares the goods received with samples over there?

Mr. HARNISH. I do—me and my assistant.

Mr. WALLACE. Is it not true that Mr. Sanger receives more salary and takes a much less active part in the duties required of him than Mr. Barry did, who received but \$900 per year?

Mr. HARNISH. Well, Mr. Barry stopped up there in that clothing department all the time, and Mr. Sanger does not, as far as I know.

Mr. WALLACE. What salary does Mr. Sanger receive?

Mr. HARNISH. I understand he receives \$1,500.

Mr. WALLACE. Have you ever known of Dr. White, Mr. Offutt, or Mr. Sanger receiving any goods after you left or closed the store for the day, or at any other time?

Mr. HARNISH. Never.

Mr. WALLACE. Has Dr. White ever consulted you about the quality of the goods received?

Mr. HARNISH. Once.



Mr. WALLACE. As a matter of fact are the goods received for the use of the patients of first grade quality, or would you class them as second grade or inferior?

Mr. HARNISH. Our goods, I consider our goods good family goods.

Mr. WALLACE. You would say then that they are not of an inferior grade?

Mr. HARNISH. I do not think they are.

Mr. WALLACE. Are they as good a grade of goods as you were in the habit of receiving under Doctor Godding?

Mr. HARNISH. About the same, sir.

Mr. WALLACE. Is it not true that you received almost every piece of furniture bought for the new buildings in addition to your other duties?

Mr. HARNISH. My assistant and I have. It would be impossible for one man to do it all.

Mr. WALLACE. At what time do you arrive at the storeroom, when do you leave, and who remains in charge after you leave?

Mr. HARNISH. I arrive at half-past seven and leave there at 5 o'clock sometimes, and sometimes half-past five, according to when our wagon gets in. I leave Mr. Cropp in charge of the store.

Mr. WALLACE. Is it not true that the patients receive less sugar since Doctor White's coming than they did before? Is there anything in that?

Mr. HARNISH. Since Mr. Sanger's coming we have used less sugar and less tea and less coffee.

Mr. WALLACE. That is, under Doctor White's administration?

Mr. HARNISH. Yes, sir.

Mr. WALLACE. Was Mr. Sanger there when Doctor White came?

Mr. HARNISH. No, sir.

Mr. WALLACE. What time did he come in?

Mr. HARNISH. What time did he come to the hospital?

Mr. WALLACE. Yes.

Mr. HARNISH. I think it was in October, or the first of November.

Mr. WALLACE. Soon after Doctor White came?

Mr. HARNISH. Oh, no—you mean this last doctor?

Mr. WALLACE. Yes.

Mr. HARNISH. Oh, yes.

Mr. WALLACE. Was there ever any waste of sugar in previous administrations that you know of?

Mr. HARNISH. Not to my knowledge. In regard to the waste of sugar the housekeeper should testify to that, because after I issue sugar I have nothing to do with it.

Mr. WALLACE. Who gets the maple sirup? Where does it go?

Mr. HARNISH. What little we get goes to the officers.

Mr. WALLACE. What officers?

Mr. HARNISH. The physicians.

Mr. WALLACE. The black molasses—who gets that?

Mr. HARNISH. The black molasses goes to make ginger cake.

Mr. WALLACE. Is that served to patients and attendants?

Mr. HARNISH. No, sir; we serve it to the servants—I do not mean the maple sirup, but a different kind.

Mr. WALLACE. It is not the black molasses?

Mr. HARNISH. No.

Mr. WALLACE. Is it true that the physicians and their families receive from the storeroom better food than the patients?

Mr. HARNISH. Yes, certainly. It is reasonable to think that they would.

Mr. WALLACE. How about the food you get?

Mr. HARNISH. It is first rate.

Mr. WALLACE. It is all right, is it?

Mr. HARNISH. Yes, certainly it is.

Mr. WALLACE. Is it better than the patients get?

Mr. HARNISH. Yes, sir.

Mr. WALLACE. On whose orders do you issue supplies?

Mr. HARNISH. Dr. White, and Miss Mary O'Leary, the house-keeper.

Mr. WALLACE. Do you retain these orders?

Mr. HARNISH. I do not retain them, but I presume they can be found.

Mr. WALLACE. Do you ever issue without an order?

Mr. HARNISH. No, sir.

Mr. WALLACE. Can you give any reason for the discontinuance of fruit there?

Mr. HARNISH. No; no reason, only the Doctor don't buy it. Perhaps his money has run short; I don't know.

Mr. WALLACE. There is none being purchased now?

Mr. HARNISH. No, sir.

Mr. WALLACE. When was the purchase discontinued?

Mr. HARNISH. I couldn't just exactly say, but I would say two years, or possibly eighteen months. I couldn't say exactly.

Mr. WALLACE. Has Dr. White ever expressed any dissatisfaction with your work or your duties there? I mean the way you have performed them?

Mr. HARNISH. Not until he called me over to his office last December.

Mr. WALLACE. Did he make any complaint about the way the fruit was distributed?

Mr. HARNISH. No, sir.

Mr. WALLACE. He said nothing about the fruit?

Mr. HARNISH. He said nothing about it.

Mr. WALLACE. How about your salary? Has it been increased or reduced? Has anything been done with it?

Mr. HARNISH. It has been reduced.

Mr. WALLACE. When?

Mr. HARNISH. Last December—no, the first of the year. Excuse me.

Mr. WALLACE. Soon after this conversation you had with the Doctor?

Mr. HARNISH. He called me over and told me.

Mr. WALLACE. If there is any reason for it, just give it.

Mr. HARNISH. I do not know of any reason, but I will tell you what the conversation was between the Doctor and I, and that is all I can tell you. The Doctor called me over there and said, "Mr. Harnish, I would like to have a talk with you in regard to your work." I said, "All right." "Now," he says, says he, "I have filled your place"—but prior to that, in regard to Mr. Sanger this was alluding to, prior to that the Doctor when he introduced Mr. Sanger to me

introduced him to me as the auditor; certainly. I did not know at the time, certainly, that the Doctor was introducing him to me as auditor and at the same time had him for a storekeeper. I was not aware, certainly; but let that go as it will. That is all right.

Mr. WALLACE. Yes.

Mr. HARNISH. When the Doctor called me over he said he would like to talk to me. "Mr. Sanger," he said, "I have made him storekeeper;" and he says, says he, certainly, "there is no place for you really now, to come right down to it, but" he says, says he "for your long stay with us," he says, "at the hospital, for your number of years with us," he says, "I do not feel like throwing you out," he says. That is just as near the words as I can tell you. Possibly Doctor White could help it out some. He says, says he, "In your place here," he says, says he, "I would make you assistant storekeeper," and he says, says he, "before going any further," he says, says he, "I can hire," he says, "all the men I want," he says, "in ten or fifteen minutes for \$40 a month." I was getting \$75 a month at the time. Well, I hadn't much to say, of course. He took me by surprise, and I couldn't say much one way or the other. He said, "I want you to say how much you would be willing to work here for." I said, "Doctor, I don't care to say that. I don't want to say that." "Well," he says, "I want you to say it." I still insisted that I did not want to say anything of that kind. Says I, "Supposing we do not agree. Suppose I say something and you do not agree. We will be as bad off as we were before. I would rather not say that," says I; "I certainly want to get along in this world as easy as I can, and I don't care to do that." He says, "That is the only way out of it." "Well," says I, "Doctor, all right. Certainly," says I, "I can not see how I can live at the present time on less than \$60 a month." "Well," says he, "I will give you that"—as much as to say, "If you had asked any more I wouldn't have given it to you."

Mr. HAY. Mr. Harnish, I did not understand whether there were employed in this store four people or three. I understand that Mr. Sanger is the storekeeper?

Mr. HARNISH. Yes.

Mr. HAY. And you are the assistant?

Mr. HARNISH. I am the assistant storekeeper, and Mr. Cropp is an assistant.

Mr. HAY. So there are three of you?

Mr. HARNISH. Three, including Mr. Sanger, certainly.

Mr. HAY. Before Mr. Sanger came you had two, or did you have three?

Mr. HARNISH. Two—Mr. Cropp and myself.

Mr. HAY. Was that before the former storekeeper resigned—this man Barry?

Mr. HARNISH. Certainly.

Mr. HAY. When Mr. Barry was there you had three, did you?

Mr. HARNISH. No, sir.

Mr. HAY. Only two?

Mr. HARNISH. Only two, certainly. Mr. Barry took care of his own department there and took care of the books.

Mr. HAY. What does Mr. Sanger do?

Mr. HARNISH. Well—

Mr. HAY. Who keeps the books?

Mr. HARNISH. Mr. Sanger has supervision over the books, and Mr. Ham keeps the books.

Mr. HAY. Then you have four—Mr. Sanger, Mr. Ham, yourself, and Mr. Cropp?

Mr. HARNISH. Yes, sir; that is it, four. That is right.

Mr. HAY. And before this new arrangement you had only two?

Mr. HARNISH. No, we had three.

Mr. HAY. Oh, you had Barry, yourself, and Mr. Cropp?

Mr. HARNISH. Yes, sir; and Mr. Ham. Mr. Ham keeps the books.

Mr. HAY. How about Mr. Cropp? When did he come there?

Mr. HARNISH. Mr. Cropp came there two years—I think it is two years in August.

Mr. HAY. Does Mr. Sanger perform any more duties than were performed by the man who preceded him? Does he do anything more than was done by Mr. Barry?

Mr. HARNISH. In regard to the books, I suppose he does about the same.

Mr. HAY. What else does he do that Mr. Barry did not do?

Mr. HARNISH. He don't do anything. Mr. Barry done the issuing, as far as I understand, up in the tailor shop. Mr. Sanger don't do the issuing. There is a lady up there that does it.

Mr. HAY. How many people has Mr. Sanger under him? We keep on adding to them. There is a lady now, and that makes five.

Mr. HARNISH. He has a great many under him in the sewing room. There is a lady here who will testify about that. There are a great many people in the sewing room. I don't go there, only seldom on business.

Mr. HAY. Does Mr. Sanger perform the same duties that Mr. Barry performed?

Mr. HARNISH. Not to my knowledge.

Mr. HAY. He does not perform the same?

Mr. HARNISH. No, sir.

Mr. HAY. Does he perform more or less?

Mr. HARNISH. I should say that he performs less duties, because he don't do any of the work up in the sewing room or in the tailor shop, and Mr. Barry did it.

Mr. HAY. What is the salary that was paid to Mr. Barry?

Mr. HARNISH. \$75.

Mr. HAY. What is the salary paid to Mr. Sanger?

Mr. HARNISH. \$1,500.

Mr. HAY. What salary did you receive when you were under Mr. Barry?

Mr. HARNISH. \$75.

Mr. HAY. And now you receive \$60?

Mr. HARNISH. Yes.

Mr. HAY. What salary did Mr. Cropp receive?

Mr. HARNISH. He receives \$35 now.

Mr. HAY. What did he receive before?

Mr. HARNISH. \$30.

Mr. HAY. So he has been increased?

Mr. HARNISH. Yes, sir.

Mr. HAY. What does Mr. Ham receive?

Mr. HARNISH. \$35.

Mr. HAY. What did he receive before?

Mr. HARNISH. He got an increase, but I don't know just what—I think \$2.50 or \$5. I think it was \$5.

Mr. HAY. So everybody has been increased but you?

Mr. HARNISH. Yes, sir. Perhaps the doctor thinks I can stand it better than the others.

Mr. HAY. Possibly so. Are things cheaper now than they were when you got more?

Mr. HARNISH. They are dearer, a good deal dearer.

Mr. HAY. It costs more to live than it did before?

Mr. HARNISH. A lot more to live.

Mr. HAY. Do you perform the same duties now that you did before your salary was reduced?

Mr. HARNISH. I do.

Mr. HAY. Could your services be done away with without injuring the store? Would somebody have to be put in your place?

Mr. HARNISH. There would have to be. Perhaps the doctor would come in.

Mr. SMYSER. That is getting pretty dangerous, now.

Mr. HAY. I mean to say, could Mr. Cropp and Mr. Ham do what you do, and attend to the duties they have to perform without injury to the service?

Mr. HARNISH. No, sir; they could not do it.

Mr. HAY. They could not?

Mr. HARNISH. No, sir. It could not be done.

Mr. SMYSER. In other words, is the force that is employed there now necessary for the proper management of that branch of the business?

Mr. HARNISH. There are not any more than enough, sir.

Mr. SMYSER. I thought it would be kind of funny if we could find a place where they ought to cut down the force.

Mr. HAY. How long does Mr. Ham and how long does Mr. Cropp stay in the store? How many hours do they work?

Mr. HARNISH. Mr. Cropp opens the store, you know. I do not get to the store until half past 7. Mr. Cropp opens the store at 7 o'clock, about that time, and remains some evenings until 7 o'clock. He remains until our wagon comes back. That would be sometimes 5 and sometimes 6 and sometimes possibly half past 4.

Mr. HAY. He is there all day?

Mr. HARNISH. Yes, sir.

Mr. HAY. Mr. Ham keeps the books, does he?

Mr. HARNISH. Yes, sir.

Mr. HAY. He and Mr. Sanger keep the books?

Mr. HARNISH. Yes, sir.

Mr. HAY. Do you issue from this storeroom clothes for the patients?

Mr. HARNISH. No, sir; that is upstairs where Mr. Sanger is.

Mr. HAY. What becomes of their boxes and barrels and all that sort of thing?

Mr. HARNISH. They sell them, sir.

Mr. HAY. You do sell them?

Mr. HARNISH. Yes, sir.

Mr. HAY. Do you keep an account of it?

Mr. HARNISH. I do.

Mr. HAY. That is turned into the Treasury, I suppose?

Mr. HARNISH. That is turned into the Treasury.

Mr. HAY. How often does the superintendent come through the store, to see that everything is all correct, and to examine the goods, and so on?

Mr. HARNISH. He does not come at all, sir.

Mr. HAY. He does not come at all?

Mr. HARNISH. No, sir.

Mr. HAY. How often did the superintendent who preceded Doctor White come to the store?

Mr. HARNISH. Very often. He used to come there and tell me when he would see a shelf empty——

Mr. HAY. Who came through and told you?

Mr. HARNISH. I say that Doctor Richardson when he was there—— poor fellow——when he would see a shelf or two that was empty he would always say "You have got to get something to put on it." All our shelves are empty now.

Mr. HAY. What was the custom and habit of the institution before the present superintendent took charge with regard to the distribution to the inmates of fruits, such as apples, oranges, and fruits of that kind? Did you always keep them in stock?

Mr. HARNISH. Yes, sir; I did. I always kept them in stock. Doctor Richardson was very liberal, and so was Doctor Godding.

Mr. HAY. As I understand it the running of that store costs more now than it did before?

Mr. HARNISH. I don't know. I couldn't say.

Mr. HAY. We can count it up. You have 4 men employed there——

Mr. HARNISH. Oh, I thought you meant about the goods. Excuse me.

Mr. HAY. No. One man gets \$1,500?

Mr. HARNISH. Yes, sir.

Mr. HAY. And you get \$720?

Mr. HARNISH. Yes, sir.

Mr. HAY. And two other men get \$35 a month each, which would be \$840, would it not?

Mr. HARNISH. Yes, sir.

Mr. HAY. And before you got \$900 and Mr. Barry got \$900 and Mr. Cropp got \$30 a month?

Mr. HARNISH. Yes, sir. There used to be a lady in there with Mr. Ham. There was a lady in there, and that would make four. She got about \$30, I think. I want to tell you as near as I possibly can those things. I do not want to make any mistake.

Mr. SMYSER. Before Mr. Sanger came and these salaries were readjusted what did it cost to run the storekeeper's department?

Mr. HARNISH. I never took any account of that. What I was employed there for was to disburse and receive.

Mr. SMYSER. You do not understand me.

Mr. HAY. He means clerical force.

Mr. SMYSER. You say there were yourself, and Mr. Ham, and Miss somebody, and Mr. somebody else. How much, in the aggregate, did that amount to, by way of salary?

Mr. HARNISH. Well, I got \$900, and Mr. Cropp got \$360, and Mr. Ham \$30 a month, as far as I know. I think that is about right;

and this lady \$30 a month—that would be \$360; Mr. Barry, \$900, the same as me; yes, sir.

Mr. SMYSER. There were two nine hundreds and three three hundred and sixties?

Mr. HARNISH. Yes, sir, that is it. Let us make sure. I want to make sure. I received \$900 and Mr. Barry received \$900, Mr. Cropp \$360, Mr. Ham I think \$360, if I do not mistake, and Miss Mullin \$360.

Mr. HAY. Then there were five people there, and now there are only four?

Mr. HARNISH. Mr. Cropp is taken from me very often, and taken in there to do that work, and it leaves me alone in the store. So we double up, as they say.

Mr. HAY. There were five people, according to your last statement?

Mr. HARNISH. Yes, sir.

Mr. HAY. Employed there. That was your last statement?

Mr. HARNISH. Yes, sir.

Mr. HAY. And they got an aggregate salary of \$2,880?

Mr. HARNISH. Yes, sir.

Mr. SMYSER. If you had another it would be \$3,240—if he has five.

Mr. HAY. Three of them were getting \$360 a year, and two of them \$900 a year.

Mr. SMYSER. Oh yes, that is right.

Mr. HAY. Now you have four people, and one of them gets \$1,500 a year?

Mr. HARNISH. Yes.

Mr. HAY. And you get \$720 a year?

Mr. HARNISH. \$720.

Mr. HAY. That is \$2,220?

Mr. HARNISH. Yes.

Mr. HAY. And two get \$35 a month apiece?

Mr. HARNISH. Yes.

Mr. HAY. That is \$840?

Mr. HARNISH. Yes.

Mr. HAY. So that would be \$3,060?

Mr. HARNISH. Yes, sir.

Mr. HAY. So there is not very much difference?

Mr. HARNISH. Yes; but you must remember that Mr. Cropp is taken away from me part of the time to do that clerical work in there.

Mr. HAY. To do clerical work?

Mr. HARNISH. Yes, certainly, on the books.

Mr. HAY. I thought you said Mr. Sanger and Mr. Ham did the clerical work.

Mr. HARNISH. They are supposed to do it, but Mr. Sanger is not there to do it.

Mr. HAY. How much of this clerical work is there? How long does it take to do it?

Mr. HARNISH. There is quite a lot of it, with all those orders, so many orders coming in. They have to be taken off onto large sheets, and then they have to be transferred to the books.

Mr. HAY. What do you think of the system there?

Mr. HARNISH. I think the system is all right. There is no objection to the system.

Mr. HAY. You think it is a good business system, do you?

Mr. HARNISH. Yes.

Mr. HAY. And one under which the interests of the Government are conserved?

Mr. HARNISH. I do not see anything wrong with the system; no, certainly not.

Mr. WALLACE. You can not suggest any improvement, can you?

Mr. HARNISH. No; I would not want to.

#### TESTIMONY OF FRANK DAVEY.

FRANK DAVEY, having been duly sworn, was examined and testified as follows:

Mr. SMYSER. What is your name?

Mr. DAVEY. Frank Davey.

Mr. SMYSER. Are you an inmate at St. Elizabeth's?

Mr. DAVEY. Yes, sir; I am a patient there.

Mr. SMYSER. How long have you been there?

Mr. DAVEY. Two years this October.

Mr. SMYSER. Were you a soldier?

Mr. DAVEY. No, sir.

Mr. SMYSER. Where do you live?

Mr. DAVEY. In Washington.

Mr. SMYSER. You lived here at the time?

Mr. DAVEY. Yes, sir.

Mr. SMYSER. What ward are you in out there?

Mr. DAVEY. I am on B four.

Mr. SMYSER. Are you a parole man?

Mr. DAVEY. I am, sir.

Mr. SMYSER. You do not have anybody as an attendant, or anything of that kind? You come and go, do you?

Mr. DAVEY. Yes, sir.

Mr. SMYSER. Do you do any work out there?

Mr. DAVEY. Yes, sir.

Mr. SMYSER. What?

Mr. DAVEY. I work in the dining room and in the kitchen occasionally. When I get tired of working in the dining room I go down and work in the kitchen.

Mr. SMYSER. You sort of go around.

Mr. DAVEY. Yes, sir.

Mr. SMYSER. Do you get any pay for that?

Mr. DAVEY. No, sir; they do not pay me to work at all. I do it on my own accord.

Mr. SMYSER. You would sooner do it than to be idle?

Mr. DAVEY. Yes, sir.

Mr. SMYSER. Did you know George Thorn?

Mr. DAVEY. Yes, sir.

Mr. SMYSER. Where was he at work?

Mr. DAVEY. On B four; the head attendant.

Mr. SMYSER. Do you know anything about his treatment of patients?

Mr. DAVEY. Yes; I seen him hit a patient one day for tearing up his clothes.

Mr. SMYSER. Who was the patient?



Mr. DAVEY. His name was Heiberger.

Mr. SMYSER. Is he there yet?

Mr. DAVEY. Yes, sir.

Mr. SMYSER. Did you report it, or do you know whether it was reported to anybody?

Mr. DAVEY. No, sir.

Mr. SMYSER. How did he hit him.

Mr. DAVEY. He just hit him with his open hand. He did not hurt him. He just give him to understand that he must not tear up his clothes, and he told him he would tear up his clothes whenever he got good and ready, and he would tear up a suit of clothes about every week.

Mr. SMYSER. Where did he hit him with his open hand?

Mr. DAVEY. He just hit him on the head this way [indicating].

Mr. SMYSER. Did he say anything as he hit him?

Mr. DAVEY. No, sir.

Mr. SMYSER. Did he knock him down?

Mr. DAVEY. No, sir.

Mr. SMYSER. Did it leave any mark?

Mr. DAVEY. No, sir.

Mr. SMYSER. Was it cruel?

Mr. DAVEY. Well, he did it, I suppose, on the impulse of the moment, I think. He did not hurt him. He did not do it to hurt him, but to try to make him understand to stop tearing up his clothes.

Mr. SMYSER. Do you know anything else about Thorn?

Mr. DAVEY. No, sir.

Mr. SMYSER. When was this?

Mr. DAVEY. Oh, I judge about five months ago—four or five months ago.

Mr. SMYSER. Did you know Thorn's brother there?

Mr. DAVEY. No, sir.

Mr. SMYSER. Did you ever hear of Thorn's swearing at patients out there?

Mr. DAVEY. No, sir; he was a man that never swore any.

#### TESTIMONY OF MRS. JAMES DEAN.

Mrs. JAMES DEAN, having been duly sworn, was examined and testified as follows:

Mr. SMYSER. Where do you live?

Mrs. DEAN. I live at Anacostia.

Mr. SMYSER. Are you connected in any way with St. Elizabeth's Hospital?

Mrs. DEAN. I work there.

Mr. SMYSER. You work there?

Mrs. DEAN. Yes, sir.

Mr. SMYSER. In what capacity?

Mrs. DEAN. In the sewing room.

Mr. SMYSER. How long have you been in the sewing room?

Mrs. DEAN. Five years.

Mr. SMYSER. What are your wages?

Mrs. DEAN. \$18.

Mr. SMYSER. A week?

Mrs. DEAN. No, sir; \$18 a month.

Mr. SMYSER. Do you live there?

Mrs. DEAN. No, sir; I take one meal there a day. I live at home.

Mr. SMYSER. What are your hours?

Mrs. DEAN. Eight hours.

Mr. SMYSER. Do you know anything about the meat and vegetables out there?

Mrs. DEAN. Only at the table where I eat.

Mr. SMYSER. At what table do you eat?

Mrs. DEAN. Well, it is a sort of a general dining room where the employees of the sewing room, the sewing-room people, and the nurses and some of the cooks eat.

Mr. SMYSER. What do you know about the meat and vegetables at that table?

Mrs. DEAN. They are very poor.

Mr. SMYSER. What is wrong?

Mrs. DEAN. Well, all the year round it is canned vegetables, and it is not properly cooked.

Mr. SMYSER. I beg your pardon, Mrs. Dean, I was interrupted. In that dining room what have you to say about the meat and vegetables?

Mrs. DEAN. In the dining room?

Mr. SMYSER. Yes; where you eat.

Mrs. DEAN. It is very poor.

Mr. SMYSER. What is wrong with it?

Mrs. DEAN. Well, the meat is often served, and it is spoiled. I can not tell any more than about eating only one meal a day. I eat one meal a day.

Mr. SMYSER. What do you mean by saying the meat is spoiled?

Mrs. DEAN. I don't know whether it lays too long before it is cooked, or whether it is served spoiled, or anything about that, but very often it is not fit to eat and we don't eat it. It is put on the table and it is not touched.

Mr. SMYSER. What kind of meat is this?

Mrs. DEAN. Well, they generally get beef and corned beef and bacon. That is all I see that is served.

Mr. SMYSER. Which of the three is spoiled, or are all of them spoiled?

Mrs. DEAN. The corned beef and the beef.

Mr. SMYSER. Fresh meat?

Mrs. DEAN. Fresh beef and corned beef.

Mr. SMYSER. Is it roasted, or fried, or in steaks, or how is it?

Mrs. DEAN. No; all I have ever seen is boiled until the substance is all out of it, and then it is sliced.

Mr. SMYSER. Is it boiled too much?

Mrs. DEAN. It must be boiled too much when the substance is all out.

Mr. SMYSER. Well, you know, out in our country they say it is a matter of taste, as the old lady said when she kissed the cow. Is that your trouble, or is there something wrong with the meat?

Mrs. DEAN. The meat has been served spoiled, and it is very poor meat to begin with.

Mr. SMYSER. Are you a housekeeper?

Mrs. DEAN. I am.

Mr. SMYSER. Will you say that the meat was tainted?

Mrs. DEAN. Well, it is; and very tainted. Of course I have seen employees spit it out in their hands. They couldn't swallow it.

Mr. SMYSER. When was this?

Mrs. DEAN. Week before last.

Mr. SMYSER. Was it during the investigation here, or when the pork packing and beef packing revelations came from Chicago, when they couldn't eat it?

Mrs. DEAN. Yes; it was during the investigation.

Mr. SMYSER. Both ends of the route?

Mrs. DEAN. Yes; and before the investigation.

Mr. SMYSER. That was the beef, you say. What about the corned beef?

Mrs. DEAN. It has been served tainted. It is very bad. They can't eat it. They serve it at dinner time.

Mr. SMYSER. You always say "serve."

Mrs. DEAN. Well, put on the table—

Mr. SMYSER. Listen a minute. That may be due to the cooking.

Mrs. DEAN. Very likely it is.

Mr. SMYSER. Very likely. What I want to get at is, and what the committee want to get at is whether or not that meat was all right up to the time of cooking, and whether the condition in which you find it, and which you describe, is due to the cooking?

Mrs. DEAN. I don't know whether that is the case or not, whether it is served spoiled or whether it lays and is the cook's fault. I can say that the cook does not know anything about cooking.

Mr. SMYSER. Do you know whether the cook ever passed a civil-service examination?

Mrs. DEAN. Well, if she did the cooking question was never brought up.

Mr. SMYSER. In other words, you feel that you ladies out there can conduct a better examination for cooking purposes than was conducted in this case, if this lady was submitted to a civil-service examination?

Mrs. DEAN. Yes.

Mr. SMYSER. Well, I think you are right. Was the bacon served spoiled, too?

Mrs. DEAN. No; the bacon—I say all of the meat I have ever seen served on this table is bacon and corn beef and boiled beef. Once in a while we have veal or lamb, whichever you might call it. I don't know the difference after it is fixed up. I can't tell by the taste of it, just through the poor cooking.

Mr. SMYSER. This occurred, you say, week before last?

Mrs. DEAN. Well, within a few weeks past—not very long. I didn't pay much attention to the time, because I didn't eat it. I just took a cup of tea and a piece of bread. That is my dinner.

Mr. SMYSER. Not always?

Mrs. DEAN. Very often. I can not eat the cabbage. The cabbage is served there most every other day. I don't eat that.

Mr. SMYSER. You wait until you get home to eat?

Mrs. DEAN. Indeed, I wait until I cook it myself.

Mr. SMYSER. And then you know—

Mrs. DEAN. I know it is clean.

Mr. SMYSER. Clean?

Mrs. DEAN. Indeed it is, and plenty of water to wash it.

Mr. SMYSER. Do you get your breakfast at home?

Mrs. DEAN. Yes, sir.

Mr. SMYSER. Are you married?

Mrs. DEAN. Yes, sir.

Mr. SMYSER. And have you a family?

Mrs. DEAN. Yes; I have three daughters.

Mr. SMYSER. Living in Anacostia?

Mrs. DEAN. Yes, sir.

Mr. SMYSER. Do you know anything about the bill of fare that the doctors get out there?

Mrs. DEAN. From what I know and see I believe they get the best on the market.

Mr. SMYSER. Did you ever see the cooking that was done for them?

Mrs. DEAN. Oh, yes; but not lately.

Mr. SMYSER. How lately?

Mrs. DEAN. Well, within a year.

Mr. SMYSER. How is the food of the supervisors and attendants, and compared with that the patients get?

Mrs. DEAN. It is not to be compared.

Mr. SMYSER. Why?

Mrs. DEAN. Because the dining rooms are so classified, and there is so much difference in the living in those that they call the special dining room, that I think if it was divided up with the patients and the rest of the employees we could live better.

Mr. SMYSER. Do you mean to say that the patients fare better so far as the food is concerned than the attendants and employees?

Mrs. DEAN. I don't know; I have nothing to do with the wards. I never go in the wards. I never see the dining room wards at all, but there is three dining rooms that have good eating; but where I eat is off away from the rest of the building and the eating is very poor.

Mr. SMYSER. How many people eat where you do?

Mrs. DEAN. Well, most of the nurses eat at that place, but at our table there is ten.

Mr. SMYSER. Who eat at your table? Who are they? Give us the names, will you?

Mrs. DEAN. Miss Jenny Bivins, Florence Caswell, Lily Ball, Mrs. Remsen, Miss Langley, Mrs. Southard, Mrs. Weedon, and Miss Smith—she eats there sometimes, but not always—and myself.

Mr. SMYSER. Were these people at this table on the occasion of the incident that you have narrated, that occurred a couple of weeks ago?

Mrs. DEAN. They were; but probably there is a good many that is afraid of their own job.

Mr. SMYSER. How?

Mrs. DEAN. They are afraid to speak.

Mr. SMYSER. You are not, are you?

Mrs. DEAN. No; I am not.

A LADY BYSTANDER. Praise the Lord!

Mrs. DEAN. I don't owe the Government one cent.

Mr. SMYSER. Is this your idea, that this thing lately occurred, but that if we called some of these ladies in they would not admit it, but would deny it?

Mrs. DEAN. I dare say there is a few that would not.

Mr. SMYSER. Who are they, and who are the ones that are not afraid to come here? That is the reason that I asked you for these names.

Mrs. DEAN. Well, these things have been reported, and there was no action taken on them——

Mr. SMYSER. No, no——

Mrs. DEAN. And they say there is only a few that will speak for themselves, and there are others that won't do anything.

Mr. SMYSER. Who are the ones that will "talk out in meeting?" I want to get them. We have got you, and I want some of the others.

Mrs. DEAN. Mrs. Weedon. We are the only two that have been questioned about the food in that dining room. There are some that will walk out—I can not name them, because I do not know the names; I know their faces—that don't eat anything; and others will sit down and say, "This is all right."

Mr. SMYSER. Who are some of those who say, "This is all right?" Give us the names.

Mrs. DEAN. I really don't know. She is a nurse, but since she is married I don't know her name. I don't know her name.

Mr. SMYSER. What was her name before she married and took John Anderson's name?

Mrs. DEAN. I don't know her name.

Mr. SMYSER. Madam, Do you really think, now, that out of the number of attendants there there are only two who would come here, if it is a fact that conditions are as you describe, and tell us?

Mrs. DEAN. I mean two out of the ten at that table.

Mr. SMYSER. How many others were there in the same dining room at the same time, besides the ten at your table?

Mrs. DEAN. Well, I don't know how many there are. They come in and go out. I stay such a few minutes that I don't speak to many of them.

Mr. SMYSER. But in a general way?

Mrs. DEAN. I don't know how many nurses there are there, but I think they must all eat there in that dining room.

Mr. SMYSER. When you come in and sit down at the table and look around, are there as many as fifty?

Mrs. DEAN. I don't look around. I get out as quick as I can.

Mr. SMYSER. When you come in, I say, you have got your eyes with you?

Mrs. DEAN. Yes, sir.

Mr. SMYSER. When you come in and look around there, can you not tell us something about how many people there are at that dining table?

Mrs. DEAN. They are going and coming all the time. Perhaps there would be ten or fifteen, and perhaps there won't be but two. I can not tell anything about it.

Mr. SMYSER. How many other tables are there besides the one at which you sit?

Mrs. DEAN. Let's see. I have never counted them. I think there are six little round tables that seats four, besides ours.

Mr. SMYSER. That would be twenty-four people outside of the ten at your table. You can not give us the names of all of these people who were there when this incident occurred that you have narrated, that took place a couple of weeks ago?

Mrs. DEAN. No, sir; because I do not pay any attention to the people at all. I go in and get out as quick as possible. It is an unpleasant room, low and hot, with the steam turned on.

Mr. SMYSER. What do you go there for?

Mrs. DEAN. I have got to. I have no other place to eat. I can not eat in the special dining rooms.

Mr. SMYSER. Why?

Mrs. DEAN. That is what I never could find out.

Mr. SMYSER. Did you try to break into the special dining rooms.

Mrs. DEAN. No.

Mr. SMYSER. You don't know; they might admit you?

Mrs. DEAN. No, they wouldn't. I wish they would. I could eat three meals a day then, because I can't eat but very little, and sometimes nothing in the morning. I can't eat well in the morning.

Mr. SMYSER. You do at home, where you prepare it yourself?

Mrs. DEAN. Yes; I used to get it there, and take my breakfast and a cup of coffee, and it would be half past seven and I could work then until twelve, but now I have to eat early in order to get up there in time to work, and of course I can not eat as much as I could if I got it late, and it was in a dining room where I could eat. The food is so bad that I can not work on three meals a day out of that dining room, and I am obliged to take something at home before I go to work.

Mr. WALLACE. Did you work under other superintendents besides Dr. White?

Mrs. DEAN. Yes, sir.

Mr. WALLACE. How were the meals then as compared with it now?

Mrs. DEAN. Very much better. We didn't eat in the same dining room that we eat in now.

Mr. WALLACE. You ate in a different dining room?

Mrs. DEAN. Yes, sir.

#### TESTIMONY OF MRS. L. S. PAVY.

Mrs. L. S. PAVY, having been duly sworn, was examined and testified as follows:

Mr. SMYSER. Mrs. Pavy, where do you live?

Mrs. PAVY. In Washington.

Mr. SMYSER. You are not connected with the Asylum in any way, are you?

Mrs. PAVY. I am not at present.

Mr. SMYSER. Were you ever.

Mrs. PAVY. I was a Christian worker there a year ago, going once a week for Christian work, sometimes, and frequently for visits in the wards.

Mr. SMYSER. How frequently would you visit, beginning say October, 1903, up to this time?

Mrs. PAVY. I would go to the wards when I was especially requested to visit certain cases, and sometimes it was once or twice in the same week when I would hold a meeting there, and again it might be weeks and months. I don't know. I have no knowledge of how often I went.

Mr. SMYSER. Where would your work take you?

Mrs. PAVY. The meetings were held in the L building, and I was assisting Mrs. Graves, as a Christian worker.

Mr. SMYSER. What time would you get there, and what time did you have your exercises?

Mrs. PAVY. I think the meeting was at 2 or 2.30 o'clock.

Mr. SMYSER. How long would it last?

Mrs. PAVY. An hour.

Mr. SMYSER. Then where would you go?

Mrs. PAVY. Home, unless I chose to visit these special cases that I was requested to. I sometimes remained and visited the wards.

Mr. SMYSER. What have you to say about the condition of affairs there as you observed them?

Mrs. PAVY. Well, I saw so much to sadden anyone, if you believe what you hear; and I saw considerable to sadden me, so far as I witnessed it.

Mr. SMYSER. Madam, it is what you saw that we are asking for.

Mrs. PAVY. I wish I had seen all that I heard about, if it was true, but I did not; so I am willing to say what I saw.

Mr. SMYSER. What did you see?

Mrs. PAVY. On one occasion—of course I am not giving it consecutively at all, but only as it comes to my mind—on one occasion I was asked to go and see about the case of a Mrs. or Miss Chartres—I think it was Miss Chartres, C-h-a-r-t-r-e-s, is the impression I have of the name that was given to me. She was a lady about fifty or sixty years old, and they said she was knocked down by a nurse, and wanted me to go and see her—

Mr. SMYSER. No; we want what you saw.

Mrs. PAVY. I am trying to tell you what I saw, but I first want to tell you why I went. I was told that she was knocked down by an attendant, and her hip was broken, and that it was a Christian duty, and it would be a privilege to go to her and comfort her. So I told Mrs. Graves about it, and Mrs. Graves and I went together. I was sent to the right ward and the right hall and the right door, and when I learned that I had reached the right place I asked a nurse who was standing near to admit me to her room. She said: "I can not do it, for I have not the key." I said: "Is she locked in a room?" She said: "Yes; she is always locked in a room." I said: "Would you kindly get the right nurse who has the key?" Well, she went off, and after being gone some time came back, and a very ill tempered and ill-natured young nurse came and opened the door, and Mrs. Graves and I attempted to go in. We both had to go back, gagging, for the air, if it was not three weeks old, was as bad as most air would be that was three weeks old. We went back into the ward and recovered our breath, and after the door was opened a little while, the nurse stood there, and I said: "Do not close the door, because we want to go in to have prayer at that woman's bedside."

We waited until some other air had been admitted and then went in. I said: "Why is this room so cold?" It was in the winter. She said: "It would not be healthy to have much heat in here." I said: "It is not healthy to have so much cold, either." And I said: "Why isn't there any ventilation here?" "There is ventilation," she said. "Don't you see the register up near the ceiling?" I says: "That is certainly not admitting very much air, since we were stifled and smitten with it as we came in and had to retreat." Then I said: "It seems that the patient is asleep," and she said: "Well, she is asleep, I guess, but she is usually unconscious, too." We heard her muttering: "Tell them I'll be there, tell them I'll be there." That is what we heard her say while we were in there. Then as we turned we

found another patient in the room, and I said: "There is another here." She was also asleep, and the coverlid was over her face. She was locked in, in a cold room with foul air, and the coverlid over her face, and the nurse was so far away that we had to be detained quite a while while she was found, the one who had a key. Then I said: "What is the trouble with this patient?" and she said: "Oh, it is a general trouble." We then knelt and had a prayer at each one of these bedsides, and not a word was said by either one of them. If they were asleep or unconscious—at any rate, they did not wake, and we went out.

Mr. SMYSER. When was this?

Mrs. PAVY. I went away from here a year ago last May, and it was in the early—well, I can't say; from the 1st of January to the 1st of May. I can't tell, though. I might say to the 1st of March. I presume I might say the 1st of January to the 1st of March, 1905, I think it was. We went immediately to Dr. Clark, and I told him of the circumstance. He said: "Why, Madam, that woman, Miss Chartres, she fell in the ward and broke her hip, and she is a paralytic, and she is unconscious most of the time." I said: "Dr. Clark, do you for a moment justify yourself that an unconscious paralytic with a broken hip should be locked in a cold room with foul air under a nurse that behaved as she did while we were there—cross, crabbed, ill-natured, and illiterate young nurse—whom I heard quarreling as I came away from the ward?" Mrs. Graves and I walked past the door where there was violent quarreling of a number of nurses, a group of them, and I wouldn't have one of those nurses under any circumstances if I only had a flea-bite, much less if I were dying and unconscious and paralytic. Mrs. Graves said: "Oh, don't go over there."

I said: "Yes, I will go over there," and I went over to the door and stood listening to the quarrel, and as rapidly as each one observed that I was there they stopped talking, and finally I stayed until it was all quiet, and then I went away. I went to Dr. Clark and said: "Can you justify yourself in this?" "Well," he said, "I will investigate it. I will see about the nurse and the locked door and the foul air, etc." I said: "I can not give any proof at all, but I do say this, that my supposition would be that she is not fed, either. She certainly is neglected," and the case ended there as far as that was concerned.

There is another case. I was visiting the wards with a young woman whose sister was there, and in order, as I say, to show why I went I must repeat some hearsay. The sister said that she could not think her sister was insane, and she believed she was sane enough to receive comfort from my talk with her, and she wished, or thought that it was my duty, to go and see her, and I did. I found a very bright and apparently a very sane young woman, very cheerful and very gentle. I am sure it was very easy to manage her, but she said she was trembling because she had been violently beaten the day before, and I asked her why—

Mr. HAY. What was the name of the patient?

Mrs. PAVY. I can not give you the name. I am trying to find the sister again. I have been away a year, and only came a few days ago from Philadelphia. I roomed in the house where the sister was housekeeper, and I think one of my address books has the name, but I have been unable to find the address book. But this one that I am now speaking of in the asylum has been sent out since, as cured



I suppose. I presume they do not send them out until they can say that. I went to see her, and as I say, she said she had been beaten the day before violently. I said: "Why?" "Well," she said, "I don't know why, but I suppose"—and this is quite in keeping with the forgiving and gentle nature that I suppose she had—she said, "I suppose that I did something wrong, but if I did I don't know what it was." So I went away and told the gentleman to whom her sister was engaged. He immediately went out and demanded that something should be done about the girl, and the nurse——

Mr. SMYSER. Were you along?

Mrs. PAVY. No, sir; I was not.

Mr. SMYSER. Please omit that. He is here and can tell that.

Mrs. PAVY. Well, as I say, that girl has gone out of the asylum.

Then there is another case, a young woman who is now on Seventh street, and who was sent out of the asylum for three days on probation, to her mother's house, to see if she could not get some better and eat, because she could not eat there. She is now on Seventh street, and I saw her. She has black and blue marks, from being beaten and tied with sheets in chairs, etc. She is told that she has consumption, and she is sick and sick in bed now at her mother's house, unless since I have been in Philadelphia—I was away ten days and went back to Philadelphia and have just come here again—unless in that time she may have been removed to the asylum.

Mr. SMYSER. What is her name?

Mrs. PAVY. Her name is Mrs. Hutchinson, at 512 Seventh street NW—Mrs. Birdie Hutchinson.

Mr. SMYSER. Go ahead.

Mrs. PAVY. I am acquainted with Mrs. Corbett and her daughter, and while I do not pretend to be a physician and to have technical knowledge of the mind and their physical condition, I am able to say that so far as associations week after week and day after day are concerned, by my visits there and conversations upon many subjects, in a quiet way, with no agitation whatever, that I could never believe anyone that would say that Mrs. Corbett and her daughter, either one of them, were insane.

Mr. SMYSER. Do you know, madam, that those very cases were investigated in court?

Mrs. PAVY. I don't care for that.

Mr. SMYSER. And the court and jury and everybody were wrong, you think?

Mrs. PAVY. I don't care at all for any investigation in court with reference to Mrs. Corbett and her daughter, because they would not allow her to witness, as she wanted to witness, and they would not allow witnesses who were there to testify for her, and to speak, in one court.

Mr. SMYSER. But do you know the fact that after they had been adjudged lunatics and sent there on habeas corpus proceedings there was another hearing? Do you know that?

Mrs. PAVY. I don't know it, and I am not influenced by it when I do hear of it.

Mr. SMYSER. And do you not know that Mrs. Corbett and the daughter were on the witness stand for hours?

Mrs. PAVY. Yes; and made a very favorable impression on many, if not upon the judge. Mrs. Corbett and her daughter I do not believe are insane.

Mr. SMYSER. But do you not—

Mrs. PAVY. I am only saying my own opinion, of course.

Mr. SMYSER. Do you not see, if we were to take the individual opinion of everybody, the institution might as well stop.

Mrs. PAVY. I would that you could have the opinion of a physician outside of that asylum.

Mr. SMYSER. My Lord, madam, the country is full of doctors, and alienists, and specialists, Christian scientists, and all classes that have cases. If these women are improperly held there they could have that matter determined.

Mrs. PAVY. I hope it will be. I have talked with them, and I never found the agitation that has been said results from having conversation with them.

Mr. SMYSER. That might be. What else do you know about patients out there?

Mrs. PAVY. As to the food, I have heard mention of it. I heard from the people—

Mr. SMYSER. Please omit that.

Mrs. PAVY. I have heard from nurses and attendants that the food was very bad, but I ate some myself in the dining room that this young lady refers to [indicating]—in the nurses' dining room; but I did not eat any meats or soups, because I only consented to the courtesy of a cup of tea, a glass of milk, etc. Time after time attendants or patients took me down just to have a cup of tea, so that I might stay and visit the wards again in the afternoon. So I can not speak of any solid food, for that is all I took.

Mr. BARCHFELD. How was the tea?

Mrs. PAVY. I don't remember. It was passable enough for me to drink it.

Mr. BARCHFELD. And the milk?

Mrs. PAVY. I don't remember that. I drank the milk.

Mr. SMYSER. Did you ever go back and visit Miss Chartres after that?

Mrs. PAVY. I did not, because Dr. Clark assured me that something would be done at once.

Mr. SMYSER. Did you ever go back?

Mrs. PAVY. I went out of the city, and did not go back.

Mr. SMYSER. So that whether there was any improvement there or not you do not know?

Mrs. PAVY. I don't know. I wrote asking about it from New York City, but she did not say. I had a letter from Mrs. Corbett and her daughter, and I asked them several questions and they answered some, but forgot others, and that was one of them.

Mr. SMYSER. Did Mrs. Graves leave the city, too?

Mrs. PAVY. No, sir; she did not. She conducted the work, and is still living in Washington.

Mr. SMYSER. To your knowledge, do you know whether she went back to visit Miss Chartres?

Mrs. PAVY. I do not.

Mr. SMYSER. Do you know what the name of the ill-natured young upstart of a nurse was?

Mrs. PAVY. No; I was sorry that I did not take it, but I did not, and I could not, with all the nurses there, have given a personal description full enough to have gotten the name.

Mr. SMYSER. I should think that this one would have made an impression on your mind.

Mrs. PAVY. I have a mental photograph of her face, but I have not the name.

Mr. SMYSER. And you can not tell who it was?

Mrs. PAVY. No, sir; I wish I had it.

The name of Mrs. L. J. Munger was called.

The SERGEANT-AT-ARMS. Mrs. Munger still declines to be in the city of Washington. She is supposed to be wandering around the country, and her daughter does not really know where she is; but I had the pleasure of seeing the old lady through the dining-room door, and that is as near as I could get to her. So I threw the subpoena on the floor, and said that she would have to send a doctor's certificate if she didn't come, and she said that she would do so.

The committee (at 11.30 o'clock a. m.) adjourned until to-morrow, June 12, 1906, at 10 o'clock a. m.

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HOUSE OF REPRESENTATIVES,  
*Washington, D. C., June 12, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Hay, and Wallace; also, Dr. Clark, Mr. Evans, Dr. Emmons, and others.

TESTIMONY OF DR. JOHN WARREN.

Dr. JOHN WARREN, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. Doctor, are you a practicing physician here in the District of Columbia?

Dr. WARREN. No, sir.

The CHAIRMAN. Where do you reside?

Dr. WARREN. In Prince George County, at Surrattsville. Clinton is now the post-office.

The CHAIRMAN. Did you ever visit St. Elizabeth's asylum?

Dr. WARREN. I have been in the place once or twice in my life.

The CHAIRMAN. Do you know anything about it?

Dr. WARREN. I do not, sir.

The CHAIRMAN. Do you know anything about the treatment of patients there?

Dr. WARREN. I do not, sir.

TESTIMONY OF M. J. ROBERTS.

M. J. ROBERTS, being first duly sworn, was examined, and testified as follows:

The CHAIRMAN. Where do you reside?

Mr. ROBERTS. I reside in Prince George County, Md.

The CHAIRMAN. Do you know anything about this hospital for the insane?

Mr. ROBERTS. Nothing in the world.

The CHAIRMAN. Have you ever been there?

Mr. ROBERTS. I was there some years ago, but only as a visitor.

The CHAIRMAN. Not within the last three or four years?

Mr. ROBERTS. No, sir.

(The witnesses Dr. R. A. Pyles, Dr. Chester Pyles, John L. Warren, George Hardy, and M. J. Roberts, upon being interrogated by the chairman as to whether they knew anything about St. Elizabeth's asylum, or the treatment of patients therein, replied in the negative and were excused from further attendance.)

Dr. EMMONS. Mr. Chairman, I think Mr. Evans intended to prove by Dr. Pyles the sanity of Mr. Thornton O. Pyles.

The CHAIRMAN. I do not think we desire to go into that question.

#### TESTIMONY OF JEREMIAH A. CONNELL.

JEREMIAH A. CONNELL, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. Connell, you were a patient at St. Elizabeth's at one time?

Mr. CONNELL. I am at present.

The CHAIRMAN. How long have you been there?

Mr. CONNELL. Since September 30, 1903.

The CHAIRMAN. Did you go there voluntarily or were you committed there?

Mr. CONNELL. I was committed there.

The CHAIRMAN. On whose application?

Mr. CONNELL. On my wife's.

The CHAIRMAN. What was the matter with you?

Mr. CONNELL. I was drinking pretty heavy, sir.

The CHAIRMAN. I suppose you have tried to get out at times, or tried to get your discharge?

Mr. CONNELL. I have asked for it, but I never went to court to do it, sir.

The CHAIRMAN. Did you ever employ a lawyer in connection with the matter?

Mr. CONNELL. I have not employed any yet. I have talked with one.

The CHAIRMAN. Who was your lawyer?

Mr. CONNELL. Mr. R. P. Evans.

The CHAIRMAN. Have you talked with him since this investigation has been going on.

Mr. CONNELL. I have, sir.

The CHAIRMAN. Did you know him before this investigation began?

Mr. CONNELL. I did, sir.

The CHAIRMAN. Did you know a patient there by the name of Daddysman?

Mr. CONNELL. I did, sir.

The CHAIRMAN. What sort of a fellow is he?

Mr. CONNELL. He seems to be a pretty nice sort of a man, as far as I know.

The CHAIRMAN. Is he there now?

Mr. CONNELL. He is not there now; no, sir.

The CHAIRMAN. Do you know an attendant by the name of Hawkins?

Mr. CONNELL. Fred Hawkins; yes, sir.

The CHAIRMAN. Did you ever see him attack Daddysman?

Mr. CONNELL. No, sir; not Hawkins.

The CHAIRMAN. Did you ever see anybody attack Daddysman?

Mr. CONNELL. I have.

The CHAIRMAN. Who was it?

Mr. CONNELL. George Wheaton.

The CHAIRMAN. What did he do to him?

Mr. CONNELL. He knocked him down and punched him. I taken him off of him.

The CHAIRMAN. Is Wheaton there yet?

Mr. CONNELL. No, sir; he was discharged for going out with me to get chestnuts at five o'clock in the morning—he taken me out of the bed in the ward.

The CHAIRMAN. How long after this assault on Daddysman was he discharged?

Mr. CONNELL. I judge about a month or six weeks.

The CHAIRMAN. Did you ever report this to any of the supervisors or doctors around there?

Mr. CONNELL. I told the head attendant on the ward.

The CHAIRMAN. What did he say?

Mr. CONNELL. Why, he never gave me any answer at all.

Mr. HAY. Who was he?

Mr. CONNELL. Mr. Charles Bixler.

Mr. HAY. Is he there now?

Mr. CONNELL. Yes, sir.

The CHAIRMAN. What ward was this in?

Mr. CONNELL. In Sycamore ward.

The CHAIRMAN. Do you know a man by the name of John Hodges?

Mr. CONNELL. No, sir.

The CHAIRMAN. Or John Hughes?

Mr. CONNELL. Yes, sir; I know John Hughes.

The CHAIRMAN. Where did you know him?

Mr. CONNELL. I knew him in Sycamore ward.

The CHAIRMAN. He died, did he not?

Mr. CONNELL. He died, so they say.

Mr. HAY. Do you know anything about how he died or anything about his case?

Mr. CONNELL. When I saw him over in B building he had a pair of pretty black eyes and he said they were given to him by a patient.

The CHAIRMAN. You did not see anything of it?

Mr. CONNELL. I didn't see anything of it at all, sir.

The CHAIRMAN. How about the food there; what do you think of that?

Mr. CONNELL. I think the food in Sycamore ward could be improved on. We only received beefsteak one day in the week, which is Saturday, and then it is not tender enough for a person to chew, hardly.

The CHAIRMAN. What do you get on other days?

Mr. CONNELL. We get shoulder and corned beef, which is no good.

The CHAIRMAN. Do you ever have eggs or milk there?

Mr. CONNELL. I have never gotten it there except on Easter Sunday since I have been there.

Mr. HAY. Is Sycamore ward supplied from the general kitchen?

Mr. CONNELL. That I don't know, sir.

The CHAIRMAN. Do the patients there ever have any money?

Mr. CONNELL. I generally have some.

Mr. HAY. Is there card playing there?

Mr. CONNELL. Yes, sir; we play cards.

Mr. HAY. Do you play for anything, or just for fun?

Mr. CONNELL. I have never played for any money at all.

Mr. HAY. Did you ever see anybody else play for money?

Mr. CONNELL. I never seen anybody play for money.

Mr. WALLACE. What about the fish?

Mr. CONNELL. The fish is not fit for a man to eat.

Mr. WALLACE. How is the tobacco?

Mr. CONNELL. The tobacco is very bad. I have got a sample of it in my pocket. Any man that can chew that can do more than I can. [The witness produces the samples.]

Now, Mr. Chairman, I wish to state a little thing. This morning at the breakfast table a patient told me that if I came over here and testified, as soon as I went back and the first thing I knew I would be put in the bull pen. That is the impression the patients over there have, if they testify. At the breakfast table that was given to me by a patient by the name of Culberson.

The CHAIRMAN. What is he there for?

Mr. CONNELL. That I don't know, sir.

The CHAIRMAN. What sort of a fellow is he?

Mr. CONNELL. He seems to be a pretty bright young man.

The CHAIRMAN. Have you any idea that because you come over here and testify any change is going to be made in your case?

Mr. CONNELL. I don't think they would attempt to do it in my case. I don't know anything about others.

Mr. HAY. Have you heard of any patient who has testified here being put in the bull pen?

Mr. CONNELL. Not as yet—I have not.

#### TESTIMONY OF MISS A. O. WILSON.

Miss A. O. WILSON, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you an attendant at St. Elizabeth's?

Miss WILSON. Yes, sir.

The CHAIRMAN. Do you know anything about any trouble that happened between a male patient and a female patient?

Miss WILSON. No, sir; I can't say that I do know anything about it. It was reported to me and I reported it to the nurse in charge.

The CHAIRMAN. Was it one of the patients under your care?

Miss WILSON. No, sir; it was not my patient.

The CHAIRMAN. Who reported it to you?

Miss WILSON. The dining-room girl—a waitress in my dining room.

Mr. HAY. What is her name?

Miss WILSON. Miss Reynolds.

Mr. HAY. You say you reported it to whom?

Miss WILSON. I reported it to the one in charge of the ward the patient was in.

Mr. HAY. Who was that?

Miss WILSON. That was Miss King.

Mr. HAY. What was the name of the patient?

Miss WILSON. Fannie Davis.

Mr. HAY. Was she a colored woman?

Miss WILSON. No; she was white.

The CHAIRMAN. Do you know the name of the male patient?

Miss WILSON. No; I do not.

The CHAIRMAN. Do you know what was done after you made the report?

Miss WILSON. No, sir; I do not.

The CHAIRMAN. How about the restraint of disturbed patients?

Miss WILSON. I have not any disturbed patients. I have an infirm ward.

The CHAIRMAN. There are no disturbed patients under you?

Miss WILSON. No.

Mr. HAY. How long have you been at the institution?

Miss WILSON. For seven years.

Mr. HAY. Have you never had any disturbed patients since you have been there?

Miss WILSON. I have; but not for some time.

Mr. HAY. How long ago?

Miss WILSON. I have not been on a disturbed ward for about four years.

The CHAIRMAN. Has it often been necessary for you to use camisoles?

Miss WILSON. No, sir; it has not.

The CHAIRMAN. Have you ever used them?

Miss WILSON. I have.

The CHAIRMAN. When the doctor directed it?

Miss WILSON. Yes; but not unless—I never did.

Mr. HAY. What do you do there now?

Miss WILSON. I am a nurse.

Mr. HAY. In what ward?

Miss WILSON. In Toner No. 2.

The CHAIRMAN. What do you think about the sufficiency of nurses and attendants there?

Miss WILSON. I don't think we have enough nurses and attendants.

The CHAIRMAN. How many are there in your ward?

Miss WILSON. Two.

The CHAIRMAN. Two nurses and two attendants?

Miss WILSON. Myself and an attendant, and then I have a waitress in the dining room.

The CHAIRMAN. How many patients are there under your care?

Miss WILSON. We have 23, and they are mostly infirmed patients.

The CHAIRMAN. You think that is not enough, when the patients are not disturbed?

Miss WILSON. We can make out very well when we are all there, if there is not relieving to be done.

The CHAIRMAN. Do you sometimes have to go to other wards?

Miss WILSON. One of us will have to, either my partner or me. I have charge of the ward.

The CHAIRMAN. How often does it happen that you have to go to some other ward?

Miss WILSON. Sometimes it is quite frequently.

The CHAIRMAN. Do you mean once a week or twice a week.

Miss WILSON. I have had it happen most every day for a week and then there are other times when I am not called. Of course it is not always the same.

The CHAIRMAN. How about the food; what do you know about that?

Miss WILSON. Sometimes the food is pretty good, and at other times it is not. It is very poor.

Mr. HAY. How often is it good and how often is it poor?

Miss WILSON. I really couldn't tell you exactly, but quite frequently the meat is very poor.

The CHAIRMAN. Do you mean as regards the cooking principally?

Miss WILSON. I don't know whether it depends altogether upon the cooking or not.

The CHAIRMAN. Is there usually a sufficient quantity of food?

Miss WILSON. Sometimes it is scarce, but we usually phone and get more. We have had a scarcity of sugar. That is the only thing we ever have had a scarcity of on that ward.

Mr. WALLACE. Did a physician over there advise you that it would be beneficial to go away and take a rest, at any time.

Miss WILSON. Yes; I asked for a couple of weeks without pay.

Mr. WALLACE. What physician was it?

Miss WILSON. I asked Dr. O'Malley.

Mr. WALLACE. Dr. O'Malley advised you to take a rest?

Miss WILSON. She thought I was in need of it; yes.

Mr. WALLACE. Were you allowed to recuperate, and get ready for your rest?

Miss WILSON. I was allowed to take two weeks. I wanted two weeks on my vacation, and to be away a month. I was allowed to take two weeks without pay, and my vacation, but my position would be filled, and I would have to wait for a vacancy. I was allowed to take it in that way.

Mr. WALLACE. Do you know when Dr. O'Malley came to the hospital?

Miss WILSON. No, sir; I do not.

Mr. WALLACE. About what time?

Miss WILSON. I think it was September.

Mr. WALLACE. Do you remember what time in September?

Miss WILSON. No, sir; I don't remember.

Mr. WALLACE. Toward the first or the middle of the month?

Miss WILSON. I don't know, sir; I couldn't tell you to save my life, now. I don't remember it.

Mr. WALLACE. Who furnishes the rooms for the nurses over there; who puts the furniture in them?

Miss WILSON. The hospital.

Mr. WALLACE. Do any of the nurses furnish their own rooms?

Miss WILSON. Yes; some of the nurses furnish their rooms, but the majority of them are furnished by the hospital.

Mr. WALLACE. And the minority by the nurses themselves?

Miss WILSON. Yes, sir; there are some few of them who furnish their own rooms.

Mr. HAY. Are they obliged to do that, or do they do it of their own free will?

Miss WILSON. They do that of their own accord.

Mr. WALLACE. Those who are able to do so, I suppose?

Miss WILSON. I think anyone has that privilege.



## TESTIMONY OF W. H. LYON.

W. H. LYON, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your name?

Mr. LYON. W. H. Lyon.

The CHAIRMAN. Were you an attendant at St. Elizabeth's?

Mr. LYON. Yes, sir.

The CHAIRMAN. When?

Mr. LYON. I went there under Dr. Godding and left, and then I came back under Dr. White. I went there in 1895 and came back in 1904.

The CHAIRMAN. How long were you there then?

Mr. LYON. Under which one?

The CHAIRMAN. The second time, under Dr. White.

Mr. LYON. About fifteen months.

The CHAIRMAN. What did you leave for the first time?

Mr. LYON. I was taken kind of sick, and I left for my health.

The CHAIRMAN. Why did you leave the second time?

Mr. LYON. I got another position.

The CHAIRMAN. You left voluntarily both times?

Mr. LYON. Yes, sir.

The CHAIRMAN. Do you know anything about the treatment of patients there?

Mr. LYON. No, sir; I know nothing about the treatment of patients, only that they were treated all right as far as I know anything about them.

The CHAIRMAN. Did you ever see any of them roughly handled?

Mr. LYON. No, sir.

The CHAIRMAN. Did you ever know any attendant by the name of George Thorn?

Mr. LYON. Yes, sir.

The CHAIRMAN. Did you ever see him treat a patient badly?

Mr. LYON. No, sir; I never seen him treat one badly. I seen him, at one time, have to catch a patient and hold him from running away. The patient was trying to get away in some way. I don't know how it was—out on the hill there.

The CHAIRMAN. Was he, in your opinion, unnecessarily harsh with him?

Mr. LYON. No, sir; I don't think he used any more force than was necessary to keep the patient.

The CHAIRMAN. Did he hit him?

Mr. LYON. No, sir.

The CHAIRMAN. What do you think about the food?

Mr. LYON. Well, I think the food is fairly good. Of course you could get better food if the man is able to pay for it and go to some hotel, or something of that sort.

The CHAIRMAN. Is there plenty of it?

Mr. LYON. Yes; you can get all you want to eat there.

The CHAIRMAN. Do the attendants have the same kind of food as the patients?

Mr. LYON. Pretty much the same. There is not much difference.

Mr. SMYSER. In whose favor was the difference, if there was any?

Mr. LYON. I guess it was in the attendant's favor, if there was any; but it would be hard to determine which was which.

The CHAIRMAN. Did the patients under your charge go to the general dining room?

Mr. LYON. Yes, sir.

The CHAIRMAN. Who ate in that general dining room?

Mr. LYON. All the patients that were able to go ate in there.

The CHAIRMAN. Did the old soldiers go there?

Mr. LYON. Yes, sir.

The CHAIRMAN. Did the seriously disturbed patients go there, too?

Mr. LYON. Some of them did.

The CHAIRMAN. Did you ever see anything like rows in the dining room?

Mr. LYON. Have seen patients have falling spells there in the dining room.

The CHAIRMAN. Do you mean epileptics?

Mr. LYON. Yes, sir.

The CHAIRMAN. What happened when these people had epilepsy?

Mr. LYON. The attendant would take him out and take him to his ward.

The CHAIRMAN. That did not happen very often, did it?

Mr. LYON. I couldn't tell you how often it would happen. It would happen sometimes.

The CHAIRMAN. You can not tell exactly when an epileptic is going to have a fit, can you?

Mr. LYON. I can't.

Mr. WALLACE. Do you know anything about the board of visitors?

Mr. LYON. I have seen some gentlemen come over there and I was told they were the board of visitors.

Mr. WALLACE. How often did they come?

Mr. LYON. Once a month.

Mr. WALLACE. Do you know Doctor White?

Mr. LYON. I know him when I see him.

Mr. WALLACE. How often did he come there?

Mr. LYON. I don't believe I ever saw him come through the ward I was on. His assistants would come through once a day.

The CHAIRMAN. Who were the physicians in charge of the ward you were on?

Mr. LYON. Doctor Hummer.

The CHAIRMAN. He went there every day, did he not?

Mr. LYON. Yes, sir.

Mr. WALLACE. Do you know anything about gambling or playing cards over there?

Mr. LYON. No, sir.

Mr. WALLACE. You never saw anything of that kind?

Mr. LYON. No, sir; I have seen the patients playing cards around there, but I don't know whether they were gambling or not.

Mr. SMYSER. What were they playing, seven up or "500?"

Mr. LYON. Sometimes it was pedro or seven up or high five.

Mr. SMYSER. Those games are admissible in our church.

## TESTIMONY OF HENRY SPENCER.

HENRY SPENCER, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you live?

Mr. SPENCER. At Anacostia, D. C.

The CHAIRMAN. Are you the husband of Mabel Spencer, formerly a kitchen employee at St. Elizabeth's?

Mr. SPENCER. Yes, sir.

The CHAIRMAN. Did you ever go with her to Sergeant Anderson of the police force?

Mr. SPENCER. I did, sir.

The CHAIRMAN. For what purpose?

Mr. SPENCER. To get their legal advice on what action I should take in regard to the troubles we had had with one Pat Barrett, a night watchman up there.

Mr. HAY. What do you say his name was?

Mr. SPENCER. Pat Barrett or whatever his name is.

The CHAIRMAN. What was said at this interview with the sergeant?

Mr. SPENCER. The sergeant told us that, of course, he left it to our own discretion to do what we thought was right, but he said it would be hardly worth while to take it to court because the man would only get three months and the notoriety of the case would be very embarrassing. He said he thought we would get better satisfaction by leaving the whole matter to Doctor White.

Mr. HAY. Did you leave it to Doctor White?

Mr. SPENCER. Yes, sir; he went to Sergeant Anderson. Sergeant Anderson told me that Doctor White had come to him to investigate and find out the standing of my wife and the character and all, and he said he gave her a good recommendation. He said Doctor White said he was positive about the man being guilty, because he had never denied it.

He told my wife of the investigation Doctor White made, and that Doctor White said he would arrange it to have the man discharged from there, and that would be more punishment to him really than it would be to put him in prison for two or three months; that he would put him out of there and that he wouldn't have any man on the grounds where it would be dangerous for a woman to go around the grounds. He said he was going to have the grounds so that women could go around there any hour of the day or night without being molested. He said the night watchman was put there for the protection of anyone and not to assault them.

The CHAIRMAN. Was he discharged?

Mr. SPENCER. He was suspended for a few days temporarily it seems, because my wife was still working there, and they commenced to make it so unpleasant for her that I made her leave. After she left, this man was reinstated.

Mr. HAY. Is he there now?

Mr. SPENCER. Yes, sir; he is there now.

Mr. SMYER. What is his name?

Mr. SPENCER. Patrick Barrett.

**TESTIMONY OF MISS MARY SHIFFLETT.**

Miss MARY SHIFFLETT, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Miss Shifflett, are you at present a nurse at St. Elizabeth's?

Miss SHIFFLETT. Yes, sir.

The CHAIRMAN. How long have you been there?

Miss SHIFFLETT. About ten months.

The CHAIRMAN. Did you go there as a trained nurse?

Miss SHIFFLETT. Yes; I had taken a course at another hospital.

The CHAIRMAN. At what hospital had you taken a course?

Miss SHIFFLETT. At Springfield, Carroll County, Md.

The CHAIRMAN. What have you to say of the food at the asylum?

Miss SHIFFLETT. Well, it is pretty good; fairly good.

The CHAIRMAN. What ward are you in at the asylum?

Miss SHIFFLETT. I am on Oaks B, the colored receiving ward.

The CHAIRMAN. A colored receiving ward?

Miss SHIFFLETT. Yes, sir.

The CHAIRMAN. How many people are there on your ward?

Miss SHIFFLETT. Eleven.

The CHAIRMAN. How many attendants and nurses are there?

Miss SHIFFLETT. Two.

The CHAIRMAN. What is the character of those patients?

Miss SHIFFLETT. They are very disturbed most all the time.

The CHAIRMAN. Is it ever necessary to restrain them by mechanical means?

Miss SHIFFLETT. The majority of them are locked in their rooms nearly all the time.

The CHAIRMAN. Those rooms are all lighted from the outside, are they not?

Miss SHIFFLETT. Yes; they each have a window in them and plenty of ventilation.

The CHAIRMAN. How often do you or the other women on the wards go into these rooms?

Miss SHIFFLETT. Whenever it is necessary. We go into the rooms in the morning, and, of course, we have to give them their food.

The CHAIRMAN. Do all of these patients have to be fed in the rooms, or can some of them go to the dining room?

Miss SHIFFLETT. We have two that go to the dining room.

The CHAIRMAN. What dining room do they go to?

Miss SHIFFLETT. It is the dining room that is connected with the ward.

The CHAIRMAN. One of you, of course, has to take these two patients to the dining room?

Miss SHIFFLETT. Oh, yes; one of us goes down with them.

The CHAIRMAN. And the others all have to be fed, do they, or do most of them eat their meals themselves?

Miss SHIFFLETT. They all feed themselves.

The CHAIRMAN. But it is not safe to take them to the dining room?

Miss SHIFFLETT. No; we could not trust them to the dining room.

Mr. SMYSE. Why? Are they violent?

Miss SHIFFLETT. Yes, sir; sometimes they are.

The CHAIRMAN. Is there any other way in which you control them except by just putting them in their rooms?

Miss SHIFFLETT. No; that is the only thing to do with them.

The CHAIRMAN. You do not have to use these camisoles?

Miss SHIFFLETT. No, sir.

The CHAIRMAN. What doctors are connected with your ward?

Miss SHIFFLETT. Doctor Hough.

The CHAIRMAN. How often does he visit there?

Miss SHIFFLETT. Twice a day.

The CHAIRMAN. Does he, when goes there, go into all the rooms and look at all the patients?

Miss SHIFFLETT. Yes; he does. He sees every patient each day.

Mr. HAY. Have you ever used any camisoles since you have been there?

Miss SHIFFLETT. Not on the ward I am on now.

Mr. HAY. Have you ever used them anywhere else?

Miss SHIFFLETT. Well, I have seen one patient put in a camisole—a restraining sheet. It was necessary for her to be put there.

The CHAIRMAN. That was done under the doctor's direction, I suppose?

Miss SHIFFLETT. Yes.

Mr. HAY. That is the only case you have seen since you have been there?

Miss SHIFFLETT. The only one.

The CHAIRMAN. Is that restraining sheet the same thing as a camisole?

Miss SHIFFLETT. Well, I don't know. The restraining sheet is put across the patient to keep them in bed, and tied on each side of the bed. That is all I have ever seen used there.

Mr. HAY. That is all the restraint you have ever seen used there?

Miss SHIFFLETT. That is all.

The CHAIRMAN. Do you think there is a sufficient number of attendants there?

Miss SHIFFLETT. I do not.

The CHAIRMAN. You do not think there is a sufficient number, even in your ward, where there are only eleven patients?

Miss SHIFFLETT. Well, when they are both there, there is. We can do very well then, when one of us is not alone.

The CHAIRMAN. Is one of you at times sent off to relieve other wards?

Miss SHIFFLETT. Sometimes we have time off, yes, and then the other one is left alone on the ward, of course.

Mr. SMYSER. You think there ought to be two there all the time?

Miss SHIFFLETT. I do.

Mr. SMYSER. Does the fact that one of you is taken away at times result in the neglect of the patients?

Miss SHIFFLETT. Well, no, because I can go to another ward and get some one to help me if it is necessary.

Mr. SMYSER. How frequently, since you have been there, have you found it necessary to go to another ward to get assistance?

Miss SHIFFLETT. Only once.

Mr. SMYSER. Only once in the ten months?

Miss SHIFFLETT. I have not been ten months on that ward.

Mr. SMYSER. How long have you been there?

Miss SHIFFLETT. Five days.

Mr. SMYSER. And in the five days you had to call assistance? Is that it?

Miss SHIFFLETT. Yes; only once.

The CHAIRMAN. Where were you before?

Miss SHIFFLETT. I assisted in the hydrotherapeutic rooms, in the water treatment, one month before I took charge of this ward; and three months previous to that I was on night duty on a hospital ward.

The CHAIRMAN. When you were on night duty what were your duties? What did you have to do?

Miss SHIFFLETT. I had to attend to sick patients.

The CHAIRMAN. To sick patients?

Miss SHIFFLETT. Yes.

The CHAIRMAN. You were in the hospital ward?

Miss SHIFFLETT. Yes.

The CHAIRMAN. And it was necessary for them to be watched all the time?

Miss SHIFFLETT. They were all bedridden patients and old patients.

The CHAIRMAN. How many were there that you had charge of there?

Miss SHIFFLETT. Twenty-six.

The CHAIRMAN. And your duties were just to see that they were properly cared for and that nothing happened to them during the night?

Miss SHIFFLETT. Yes.

Mr. SMYSER. How are the rooms of these patients kept?

Miss SHIFFLETT. What do you mean—how are they kept?

Mr. SMYSER. As to cleanliness?

Miss SHIFFLETT. They are kept clean.

Mr. SMYSER. Is it a part of your duty to see that that is done?

Miss SHIFFLETT. Yes; it is.

Mr. SMYSER. Have you neglected that in any way?

Miss SHIFFLETT. I have not.

Mr. SMYSER. Has your assistant, that you know of?

Miss SHIFFLETT. No.

Mr. SMYSER. Now, generally, during your service there, how have the rooms been kept?

Miss SHIFFLETT. Very clean; just as clean as they possibly could be kept.

Mr. SMYSER. There are times, of course, when perhaps you have trouble in that regard?

Miss SHIFFLETT. No; I don't know as there ever has been.

#### TESTIMONY OF MISS HELEN R. TANQUARY.

Miss HELEN R. TANQUARY, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your full name?

Miss TANQUARY. Helen R. Tanquary.

The CHAIRMAN. Are you an attendant at St. Elizabeth's?

Miss TANQUARY. I am chief clerk at the female department.

The CHAIRMAN. How long have you occupied that position?

Miss TANQUARY. I went there in that capacity, and have been there nearly five years.

The CHAIRMAN. How many patients are there under your supervision?

Miss TANQUARY. There are 644 patients in the female department to-day.

The CHAIRMAN. And you have general supervision over the nurses that take care of all of them?

Miss TANQUARY. I have.

The CHAIRMAN. Do you assist in the work of training the other nurses in the training school?

Miss TANQUARY. Well, I don't give any assistance at present in the training school.

The CHAIRMAN. Did you ever have anything to do with that?

Miss TANQUARY. Yes, I did, after Miss Kramer resigned, who was formerly the superintendent of the training school. I filled out her unexpired term—three months—last year, and graduated the class.

The CHAIRMAN. Do you know anything about trouble between a female patient and a male patient over there?

Miss TANQUARY. That trouble was reported to me by one of the nurses in charge of the patient.

The CHAIRMAN. What was the name of the patient?

Miss TANQUARY. Fanny Davis.

The CHAIRMAN. Was the superintendent informed of this matter?

Miss TANQUARY. I reported the matter to Dr. Clark as soon as the nurse reported it to me.

The CHAIRMAN. What was done to prevent a recurrence of anything of that kind?

Miss TANQUARY. He ordered a treatment for her, and I delivered that order to the nurse who had charge of the patient. I can not say whether it was filled or not.

The CHAIRMAN. What was the character of the treatment that was ordered, Miss Tanquary?

Miss TANQUARY. It was a local treatment.

The CHAIRMAN. How long ago did this happen, Miss Tanquary?

Miss TANQUARY. Oh, I can not give the exact date. I think it was a couple of months ago.

The CHAIRMAN. What is the patient's condition now?

Miss TANQUARY. I have not examined the patient and I can not tell her condition. The doctors have examined her, I suppose.

The CHAIRMAN. What doctor had the matter in charge?

Miss TANQUARY. Dr. O'Malley had charge of the service then. She was not in at the time.

Mr. HAY. Did any other physician have charge of her or know anything of it?

Miss TANQUARY. Dr. Clark knew of it. I reported the matter to Dr. Clark. Dr. Hough has charge of those wards.

Mr. HAY. Who?

Miss TANQUARY. Dr. Hough has charge, Dr. O'Malley's assistant. The patient was taken in and was kept in a ward. Her parole was taken from her.

Mr. HAY. She had a parole?

Miss TANQUARY. Yes; she had the privilege of the grounds and worked in the kitchen.

Mr. HAY. How old was she?

Miss TANQUARY. I don't know her age.

Mr. HAY. Well, generally. Was she 25, 30, or 35?

Miss TANQUARY. Probably she was. I really couldn't tell you.

Mr. HAY. How was she disturbed?

Miss TANQUARY. She is not disturbed.

Mr. HAY. She is not disturbed at all?

Miss TANQUARY. No.

Mr. HAY. Well, if she was not disturbed and had parole why did she stay there? Why was she not discharged as cured, do you know?

Miss TANQUARY. I don't know why she was kept there. I did not diagnose her case.

Mr. SMYSER. Well, was she insane?

Miss TANQUARY. I suppose she was, or she wouldn't be there.

Mr. SMYSER. Did you see any evidences of insanity when you talked about her being paroled?

Miss TANQUARY. I don't—

Mr. HAY. Who has charge of these patients to say whether they shall be paroled or not?

Miss TANQUARY. The physician in charge.

Mr. HAY. The physician in charge of the ward?

Miss TANQUARY. Yes.

Mr. SMYSER. Now, you are the head nurse there of the female department. The reason I asked you the question I did as to this particular patient was this: Was she in such a condition that she ought to be continued there?

Miss TANQUARY. Well, I suppose if she is not insane, or not in a condition to be kept there, her people would take her home, or the physician would discharge her. She goes home frequently on a visit. Her people take her home.

Mr. SMYSER. Is she there yet?

Miss TANQUARY. She is there at present.

Mr. SMYSER. Is she crazy now?

Miss TANQUARY. I do not know whether she is crazy or not.

Mr. SMYSER. I want your judgment.

Miss TANQUARY. I think she is supposed to be an imbecile, as well as I recollect.

Mr. SMYSER. How long has she been there?

Miss TANQUARY. I don't know. She was there when I went there. I don't know how long she has been there.

Mr. HAY. How long have you been there?

Miss TANQUARY. I have been there since—over four years; nearly five years.

Mr. WALLACE. Do you think you have enough nurses there?

Miss TANQUARY. Well, I think on some of the wards we could use more attendants than nurses.

Mr. WALLACE. Do you think the arrangement could be bettered by allowing the girls to come back to their department when they are out on short leave?

Miss TANQUARY. How do you mean?

Mr. WALLACE. In other words, the keys are kept by some physician, or something of that kind, and the girls are said to be kept out of their department when they have been out on short leave, to attend receptions, and things of that kind?



Miss TANQUARY. The nurses are allowed a 12-o'clock night once a week. By special permission they have it oftener, and when they come to the home after 10 o'clock they have to get a key from the night physician. They go to the old building and get a key from the night physician and go over and let themselves in. They usually turn the key in the next morning to the physician, or sometimes I turn it in myself.

Mr. WALLACE. Is there such a thing as that numbers of them have to stand and wait for hours before they can get a key?

Miss TANQUARY. Yes; they have reported to me that they have waited. I do not know about it myself.

Mr. WALLACE. Now, coming back to the first question, could you suggest any improvement over that method, in any way?

Miss TANQUARY. The nurses often say to me how disagreeable it is to have to wait for the key. I think if the key would be left at a more convenient place it would be nicer for them and they would not have to wait so long for it.

Mr. WALLACE. The doctor, being busy, can not always be there, I suppose?

Miss TANQUARY. The doctor has quite a little to do, and is not always there.

Mr. SMYSER. Suppose you were not under Dr. White or the United States Government, but individually had these 644 women over there, with the help you have got. Would you say that you had enough or would you insist on more?

Miss TANQUARY. The nurses have their time off. They are entitled to a certain time off, and they have to get this time, and when they are taking it we often are short.

Mr. SMYSER. But bear in mind the other part of my question. You know the Government has largely got to foot the bill over there?

Miss TANQUARY. I know that.

Mr. SMYSER. Suppose, now, there was not any Government in charge, and you had these 644 people, with the help you have got and the means provided. Do you think you would be short of help under such circumstances, and would you say you ought to have additional help?

Miss TANQUARY. Well, I suppose if I had all of those things in charge I would try to reduce the expenses as much as I could.

Mr. SMYSER. As much as possible. Does actual neglect result to the patients over there in your department through lack of sufficient attendants?

Miss TANQUARY. No; I don't think so.

Mr. SMYSER. You have been there, as you say, five years. Generally how are these female patients looked after?

Miss TANQUARY. Very good.

Mr. SMYSER. As to cleanliness?

Miss TANQUARY. Yes.

Mr. SMYSER. And everything?

Miss TANQUARY. The patients are kept clean, and the wards are kept clean.

Mr. SMYSER. How does it compare with any other hospital that you have ever been in?

Miss TANQUARY. I was trained in the Columbia and Children's Hospital, here in the city, and am a graduate from that hospital, and

our hospital is, of course, a nicer place than what either of those hospitals are, and I think fully compares with those two.

Mr. SMYSER. In training your people as nurses, what are the fundamental things that you endeavor to impress on them to make them good nurses?

Miss TANQUARY. Why, I don't train the nurses.

Mr. SMYSER. When you gave them your instructions?

Miss TANQUARY. When I gave them instructions I taught them kindness to the patients, and to be patient with them, and I gave them instructions as to bed making and giving the hypodermics and all local treatment.

Mr. SMYSER. Having in mind the best service for the patients?

Miss TANQUARY. For the patients, always.

Mr. SMYSER. Did you know a patient over there by the name of Chartres, or Charttron?

Mr. HAY. Chartres.

Miss TANQUARY. You mean Charleton?

Mr. SMYSER. Did you know a lady by the name of Pavy?

Miss TANQUARY. No; I don't remember her.

Mr. HAY. She was not a patient. She came there to see patients.

Miss TANQUARY. On religious business?

Mr. SMYSER. Yes; on a religious mission.

Miss TANQUARY. Yes; I remember the patient.

Mr. SMYSER. Do you remember an incident when she visited a couple of rooms over there where there were two patients in the same room, and the room was very foul?

Miss TANQUARY. No; I don't remember that incident. I remember the patient quite well, and I remember the room she was in, but I don't remember the visit of this Mrs. Pavy.

Mr. SMYSER. Do you know of such an incident?

Miss TANQUARY. No.

Mr. SMYSER. Of that room being in that condition?

Miss TANQUARY. Well, sir, not until I read it in the paper yesterday evening.

Mr. SMYSER. Was that the first knowledge you had of it?

Miss TANQUARY. That was the first knowledge I had of it.

Mr. SMYSER. Could such a thing happen over there without it becoming known?

Miss TANQUARY. I hardly think so.

Mr. SMYSER. Why?

Miss TANQUARY. The nurses visit the patients very frequently, and if they call for help, or make any noise whatever, the nurses go in to them. They do not shirk their duty in that regard at all.

Mr. SMYSER. Could you conceive of an attendant or nurse that you have had over there for the last four years that would allow a room to become in that condition that is described here?

Miss TANQUARY. I hardly think so. The nurses are very particular about cleaning the rooms, and I go in them myself frequently, and if I see anything that I think is not quite right about a room, I generally call their attention to it, and they usually attend to it at once.

Mr. SMYSER. Of course, you can not always have a room like a parlor?

Miss TANQUARY. Not always, and especially among the insane.

Mr. SMYSER. Certainly not. When you see a condition of that kind you meet it at once, and correct it as far as possible?

Miss TANQUARY. Yes, I do.

Mr. SMYSER. You do the best you can?

Miss TANQUARY. I try to.

Mr. SMYSER. You do not shirk your duty in that regard, or you try not to?

Miss TANQUARY. I try not to.

Mr. SMYSER. And do you try to require a full performance of duty from those under your charge?

Miss TANQUARY. I do.

Mr. SMYSER. Is it your judgment that as a general thing they do perform their full duty?

Miss TANQUARY. Yes, it is.

Mr. SMYSER. Charleton, did you say that was the name?

Miss TANQUARY. Charleton—C-h-a-r-l-e-t-o-n.

Mr. SMYSER. Oh, Charleton. Do you know whether or not there were two patients in that room?

Miss TANQUARY. What is it?

Mr. SMYSER. Do you know whether or not there were two patients, or another beside Mrs. Charleton, in the same room?

Miss TANQUARY. I think there were three beds in the room, as well as I remember. It was a dormitory containing three beds. There were two other patients that slept in there. The instance that you speak of—

Mr. SMYSER. Did you ever hear of her being knocked down by a nurse?

Miss TANQUARY. No; the patient slipped on the floor of cypress wood and fractured her hip. That occurred before I went into the hospital.

Mr. SMYSER. Before you went there?

Miss TANQUARY. Yes, before I went there; over four years ago. It did not happen recently.

Mr. SMYSER. That is so. She said she was told that she was knocked down, and she does not pretend to say when it was. No such thing occurred since you have been there?

Miss TANQUARY. No. The patient has been dead some time.

Mr. HAY. Is she there now?

Miss TANQUARY. I say she is dead.

Mr. HAY. How long has she been dead? This Mrs. Pavy says she was there in 1905, I believe, somewhere between January and the 1st of May.

Miss TANQUARY. I don't remember when she died. I don't remember that.

Mr. HAY. But from the time her hip was fractured until she died she was confined to bed, was she?

Miss TANQUARY. No, she was not. She was a very large woman, and she got over the fracture and got up, and the condition was practically healed. After that she had a stroke of paralysis from which she never recovered.

Mr. WALLACE. A while ago, in speaking of the reduction of the expenses, if you were in charge of a number of females out there, you said you would reduce it all you could. You do not mean that you would reduce the expenses to the detriment of the patients, do you?

Miss TANQUARY. Certainly not.

Mr. WALLACE. You would always take that into consideration, the good of the patients?

Miss TANQUARY. That is what we are there for—to look out for the patients.

Mr. WALLACE. Do you know that Mrs. Pavy did not go there and find those people in the ward?

Miss TANQUARY. She may have been there. I don't know whether she was or not. I did not see her.

Mr. WALLACE. You could not say whether they were there, as she states, or not?

Miss TANQUARY. Of course, she may have gone into the room and not found it as she thought she ought to find it, but I think those conditions were looked into at once, if she found them such.

Mr. HAY. Could any such thing have happened? Could those conditions have existed for six hours at a time?

Miss TANQUARY. They never existed for six hours at a time.

Mr. HAY. Or for two hours at a time?

Miss TANQUARY. Because the nurses have too much treatment for the patients. They have to look after them too frequently. They are never left that long at a time.

Mr. HAY. How often do they go to see these patients who are confined?

Miss TANQUARY. It depends on the patients.

Mr. HAY. Suppose a patient is paralyzed and can not speak.

Miss TANQUARY. Then her door is usually left open. It is always left open, and we watch them in passing up and down the hall. Our eyes are scarcely off of them.

Mr. HAY. If the doors were always open could foul air have accumulated there?

Miss TANQUARY. I should not think it could. We have good ventilation.

Mr. HAY. And patients who are unable to move, paralyzed or otherwise—in such a state that they can not move, you say their door is always left open?

Miss TANQUARY. Their doors are always open. There is no reason for them to be closed.

Mr. WALLACE. How about in extreme cold weather.

Miss TANQUARY. The windows are usually left a little down from the top for ventilation.

Mr. WALLACE. You close the door then?

Miss TANQUARY. The door is often closed to prevent a draft.

The CHAIRMAN. I was going to ask you about the heating of the buildings generally. Is it usually satisfactory?

Miss TANQUARY. Yes; the heating is very good.

Mr. SMYER. Can you tell when this lady, Mrs. Charleton, died?

Miss TANQUARY. No; I don't remember when she died?

Mr. HAY. I suppose it would be shown at the hospital?

Miss TANQUARY. The hospital records will show it; yes; certainly.

Mr. HAY. How many employees have you under you, Miss Tanquary?

Miss TANQUARY. We have, I think, 51 nurses on day duty.

Mr. HAY. That includes those who have charge of all of the female patients?

Miss TANQUARY. All of the female patients. I visit the hospital wards several times a day.

Mr. HAY. You say you have 51 nurses under you on day duty?

Miss TANQUARY. Yes.

Mr. HAY. How many have you on night duty?

Miss TANQUARY. There are 18 on night duty at present.

Mr. HAY. That would be 69. Is there anybody else under you who takes charge of the patient, or who have the care of them?

Miss TANQUARY. No; we have 12 waitresses who look after the dining rooms, and when their work is finished they usually assist on the wards.

Mr. HAY. They usually assist on the wards?

Miss TANQUARY. Yes.

Mr. HAY. So that you have 69 for the care, about on an average, of 650 patients?

Miss TANQUARY. Yes.

The CHAIRMAN. That is 69 plus the 12.

Mr. HAY. Well, the 12, as I understand, really do not have anything to do with the care of the patients.

Miss TANQUARY. They are waitresses in the dining room, and they go in the wards also.

Mr. HAY. These waitresses in the dining room, do they know anything about taking care of the patients, or are they put there on duty—

Miss TANQUARY. They do the work on the wards—the ward work—making beds, sweeping floors, dusting chiefly.

Mr. HAY. They do not take care of the patients?

Miss TANQUARY. They do not take care of patients.

Mr. SMYSER. But, as I understand, to that extent they relieve the attendants and nurses?

Miss TANQUARY. Yes.

Mr. HAY. In your judgment, are the 69 persons that you have under you a sufficient number of people to take care of those patients?

Miss TANQUARY. Well—

Mr. HAY. I mean as they should be taken care of?

Miss TANQUARY. In some wards we find that we can use more attendants, I think.

Mr. HAY. You think you could?

Miss TANQUARY. Yes.

Mr. HAY. Miss Tanquary, if you had to say how many people should take charge of those various wards, how many would you say you ought to have under you to properly take care of them?

Miss TANQUARY. I think on a disturbed ward we could use more nurses. We have two on each ward in the most disturbed ward that we have there, in the most disturbed building. Occasionally those nurses, when the one is off duty, the other is there alone.

Mr. HAY. How many do you think you ought to have in addition to what you have already?

Miss TANQUARY. I could scarcely say that without looking more fully into the situation.

Mr. HAY. Ought you to have five?

Miss TANQUARY. I would not say. I don't know. I could not say positively.

Mr. HAY. Will you look into the situation and send to us a communication stating how many you think you ought to have?

Mr. SMYSER. Oh, come back and tell us.

Mr. HAY. No; I do not want to bring her back for that.

Mr. SMYSER. Yes; I was going to ask her that same question, Mr. Hay.

Mr. HAY. Because Miss Tanquary, as I understand, is in charge of all these people, and she must necessarily have experience and know it.

Miss TANQUARY. I helped to arrange the nurses, in sending them to the different wards to relieve, and I know that occasionally we are very short, especially in vacation time.

Mr. WALLACE. I believe you said there were some employees that assisted in nursing.

Miss TANQUARY. The waitresses, I said.

Mr. HAY. They help on the ward?

Mr. WALLACE. They help on the ward. How long has that been a custom?

Miss TANQUARY. It has been started recently.

Mr. WALLACE. How far back?

Miss TANQUARY. A couple of weeks, probably.

Mr. WALLACE. If you dispensed with the services of those waitresses and made out the number of necessary attendants upon that basis, would you need more than you have now?

Miss TANQUARY. You mean by dispensing with the domestics?

Mr. WALLACE. Yes.

Miss TANQUARY. Certainly; the nurses could not do the dining-room work. They are away from the dining room, and they could not do that.

Mr. SMYSER. What I want you to do, as the general in command of this force, is to make it your business to look over the ground as to how many nurses ought to be on duty in this ward in the daytime, and how many there are, and then report here after you have taken that sort of a survey, what additional help you think in your judgment you ought to have.

Miss TANQUARY. The physicians usually make out an order—

Mr. SMYSER. But you see I am eliminating the physicians and making you the boss.

Miss TANQUARY. Well?

Mr. SMYSER. In discharging that duty, just think you are as big as the United States Government. Do not think anything about Dr. White or any of them. We want your judgment.

Mr. HAY. Miss Tanquary, since you have been there what restraints have been used?

Miss TANQUARY. We have used the camisole and the restraining sheet, or the rest sheet.

Mr. HAY. How often are they used?

Miss TANQUARY. The camisole we use in instances where the patient is very disturbed, such as tearing their clothing, and such as breaking glass, or probably mutilating their own bodies. Those cases are usually reported to me and I report them to the doctor.

Mr. HAY. Miss Tanquary, are any of these restraints used except in such cases as you have just described?

Miss TANQUARY. I hardly think so. When the patients are fighting each other or fighting the nurses, we have to use some restraint.

Mr. HAY. A Miss Hotchkiss testified here the other day as to the treatment of her sister. Do you know anything about that case, or did you ever hear of it?

Miss TANQUARY. I don't know anything about the case. I heard it talked of, but I did not investigate it and I do not know anything about it.

The CHAIRMAN. When did you hear it talked about? At the time of the occurrence?

Miss TANQUARY. Yes, at the time it occurred.

Mr. HAY. Was what you heard then the same as you saw or heard after Miss Hotchkiss had given her testimony here?

Miss TANQUARY. I don't remember very much about the case. I did not concern myself about it at the time. It was reported to Dr. Clark, and he acted upon it, and I don't know very much about it at all, scarcely any, not enough to talk about.

Mr. WALLACE. Do you know when Dr. O'Malley came to the asylum; whether it was the first or the middle of the month?

Miss TANQUARY. I don't know; along about the first of the month, I think.

#### TESTIMONY OF MISS LOUISE HOY.

Miss LOUISE HOY, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Miss Hoy, are you one of the nurses out at St. Elizabeth's?

Miss HOY. I am.

The CHAIRMAN. How long have you been there?

Miss HOY. Three years.

The CHAIRMAN. Did you go there as a nurse, or did you take instructions in the training school there?

Miss HOY. I took the training there.

The CHAIRMAN. You went there as an attendant, and took training, and then you became a nurse?

Miss HOY. Yes.

The CHAIRMAN. What do you think of the food at the hospital?

Miss HOY. What is that?

The CHAIRMAN. What do you think about the food?

Miss HOY. In the building where I am the food is very good.

The CHAIRMAN. What building are you in?

Miss HOY. In the Q building.

The CHAIRMAN. What kind of patients are there in that ward?

Miss HOY. They are a disturbed class of patients.

The CHAIRMAN. How many are there in that ward?

Miss HOY. There are 40.

The CHAIRMAN. Forty?

Miss HOY. Yes, sir.

The CHAIRMAN. How many attendants and nurses are there?

Miss HOY. I have two on my ward—one and myself.

The CHAIRMAN. You say there are only two of you?

Miss HOY. There are only two of us.

The CHAIRMAN. And you have charge of 40 disturbed patients

Miss HOY. There are about 20 of them disturbed and a few helpless.

The CHAIRMAN. Is not that an unusually large number to have on a ward?

Miss HOY. Well, I don't think so.

The CHAIRMAN. Do all of these patients of yours go to the general dining room to eat their meals?

Miss HOY. They go to the dining room that is connected with the ward.

The CHAIRMAN. Is it on the same floor?

Miss HOY. It is on the same floor.

The CHAIRMAN. How many night attendants are there?

Miss HOY. There are two.

The CHAIRMAN. There are two night attendants and two day attendants?

Miss HOY. Yes; there is one on my ward. There is two on that floor.

The CHAIRMAN. When you speak of 40 patients being there, do you mean in your ward or on that floor?

Miss HOY. There are 40 patients in my ward; yes.

The CHAIRMAN. That two of you have to take care of during the day?

Miss HOY. There are 40; yes. And one at night has charge of the 40.

The CHAIRMAN. Do you two who have charge of this ward ever have any difficulty about it? I mean are there enough of you on that ward to take care of so many as 40, in your opinion?

Miss HOY. When one is off the other girl is left alone and does not get any relief.

The CHAIRMAN. Suppose one of the patients became unruly when there was only one of you there, how would you get help?

Miss HOY. We call one of the other nurses from the other wards to assist us.

The CHAIRMAN. Does that happen often in your ward?

Miss HOY. Not so often.

The CHAIRMAN. Are any of the patients in your ward bedridden?

Miss HOY. No.

The CHAIRMAN. What are your hours of work there?

Miss HOY. My hours are from 6 in the morning until 8 o'clock at night one day, and another day from 6 in the morning until 5 o'clock.

The CHAIRMAN. How often do you get off?

Miss HOY. We are allowed every third Sunday and a half day each week.

The CHAIRMAN. Do you live in the nurses' home?

Miss HOY. Yes, sir.

The CHAIRMAN. Do you ever have to use any mechanical restraint on the patients?

Miss HOY. I have one patient that is restrained when necessary. She is a very disturbed patient and we use what is called the strait-jacket.

The CHAIRMAN. The camisole?

Miss HOY. Yes; and we only keep it on several hours until the patient becomes quiet and then it is taken off.

The CHAIRMAN. How often does that have to be used there? Frequently?



Miss HOY. This patient gets on a disturbed spell about every six weeks and it is then used. Sometimes it is not used for three days at a time and at other times it is used sometimes five and six hours during the day.

The CHAIRMAN. Does the putting on of that strait-jacket hurt the patient?

Miss HOY. Not at all.

The CHAIRMAN. And it is always done under the order of a physician, is it not?

Miss HOY. The physician in charge; yes.

The CHAIRMAN. In your opinion would the patient be liable to do herself or some other patient harm, or do you harm, or something of that kind?

Miss HOY. Yes, she would. She is a very disturbed patient, and is fighting most all the time when she is on this disturbed spell.

Mr. SMYSER. Does she fight other patients?

Miss HOY. Yes; she fights the other patients and the nurses.

The CHAIRMAN. Who is the doctor in charge of your ward?

Miss HOY. Dr. O'Malley.

The CHAIRMAN. Does she come there in your ward frequently?

Miss HOY. Every day.

The CHAIRMAN. Does Dr. White often go through there?

Miss HOY. Doctor White has been on the ward twice since I have been on there?

The CHAIRMAN. How long have you been on that ward?

Miss HOY. Five months.

The CHAIRMAN. Do you often see the board of visitors there?

Miss HOY. Well, I have seen Mrs. Gangewer—I think she is on the board of visitors—there. That is the only person I have seen.

The CHAIRMAN. She goes there quite frequently, does she not?

Miss HOY. Yes, she does.

The CHAIRMAN. I mean, at other times than on the regular visiting days; she goes there at all sorts of times, does she not?

Miss HOY. Yes.

Mr. SMYSER. Do you know a Mrs. Pavy?

Miss HOY. No, I don't know her.

The CHAIRMAN. Did you know a patient named Mrs. Charleton?

Miss HOY. I did; I was on the hospital ward when she was there.

Mr. HAY. When were you on that ward with her?

Miss HOY. On the ward with her?

Mr. HAY. Yes; with Mrs. Charleton.

Miss HOY. I suppose it has been about a year and a half since I have been on the ward with her.

Mr. HAY. Do you remember when she died?

Miss HOY. No, I do not; I was not with her then.

Mr. SMYSER. Do you know of any such instance as Mrs. Charleton and another patient being in the same room, a room that was very foul?

Miss HOY. I know there were two other patients in the room, but I have never seen the room when it was very foul, no.

Mr. SMYSER. Could such a thing happen?

Miss HOY. It could not. The nurses are there, and are supposed to be looking after it.

Mr. SMYSER. You say the nurses are supposed to. Do they try to keep the rooms in good order, or not? Are they negligent?

Miss HOY. No, indeed; they try to keep the rooms in very good order.

Mr. SMYSER. Do you think it would be possible that such a thing could have happened as has been described here, and left in such a condition that it seemed as though the foulness had been gathering for three weeks?

Miss HOY. No, I do not.

Mr. SMYSER. You would not tolerate such a thing, would you?

Miss HOY. No, sir.

Mr. SMYSER. And you would not do it yourself or tolerate it in anyone under you, or associated with you?

Miss HOY. I would not.

Mr. SMYSER. And if you would see it in any other ward would you report it?

Miss HOY. I would, to the nurse in charge.

Mr. WALLACE. Was this room located in your ward?

Miss HOY. Yes; I was on the ward at the time this gentleman speaks of.

Mr. HAY. You say you were on that ward?

Miss HOY. Yes; Mrs. Charleton was on that ward, and I was on that ward. I served almost a year.

Mr. HAY. Did you stay there until she died?

Miss HOY. No; I was not on the ward when she died.

Mr. WALLACE. Were you there when Mrs. Pavy came there?

Miss HOY. I don't know Mrs. Pavy at all.

Mr. WALLACE. You never saw her?

Miss HOY. No.

Mr. WALLACE. So you can not say what happened after you left the ward, can you?

Miss HOY. No, I can not.

#### TESTIMONY OF MRS. ALICE CARRAHER.

ALICE CARRAHER, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. I understand that you wish to correct some testimony that you gave here, Mrs. Carraher?

Mrs. CARRAHER. I do not know why I am here. They sent for me to come.

The CHAIRMAN. I do not know why you are here, either. Somebody asked us to have you subpoenaed again, so we subpoenaed you.

Mr. WALLACE. There is something on that sheet [indicating] that may throw some light on it.

Mr. HAY. Mrs. Carraher, when you were here before did you tell everything you knew about the institution?

Mrs. CARRAHER. Oh, I understand that Doctor Logie testified that my husband was full of bruises and sores when I brought him to the institution, but there is not a word of truth in it. I attended him like he was a child, and I washed and dressed him two hours before I sent him to the institution in Doctor Clark's, of East Capitol street, carriage, and he did not have a sore or a bruise on him; but during the time when he was in the hospital he had a terrible bed sore. That

is the first sore I ever knew him to have. Since I married that man he never had a sore of any kind that I know of.

Mr. WALLACE. Has your husband been bruised since this investigation started?

Mrs. CARRAHER. Yes; he was bruised on the forehead, on the right hand side on the Friday following the day Doctor Logie testified here, and the nurses said that when they went off in the afternoon he had not been bruised, and when they came on in the morning he had the bruise. Mr. Blynn was on the night watch, but he could not give any account of how that bruise came there.

Mr. SMYSER. How do you think it got there?

Mrs. CARRAHER. Sir?

Mr. SMYSER. How do you think that bruise got there?

Mrs. CARRAHER. I really could not tell about that.

Mr. SMYSER. Do you think somebody struck him?

Mrs. CARRAHER. I heard Doctor Logie made an investigation the day before I got there, but he couldn't find out how he got the bruise.

Mr. SMYSER. Does he fall?

Mrs. CARRAHER. I did not know that he did.

Mr. SMYSER. I am not asking you about that particular time; but does he fall at times?

Mrs. CARRAHER. They tell me over there that he falls, but I have never seen him fall, and he seems very quiet when I am there, and does not seem to disturb anyone. He seems a little cross, and that is about all; but he did not become cross when he was home, but I don't know why only I talked to him very kindly when he was at home.

Mr. WALLACE. Does any other kind of talk irritate him?

Mrs. CARRAHER. Sir?

Mr. WALLACE. Would harsh talking irritate him?

Mrs. CARRAHER. Yes, it would. I told them when I took him there to be as kind as they could, because I had noticed that if anyone would speak harsh to him it would make him very much worse.

Mr. WALLACE. Abusive language would excite him then?

Mrs. CARRAHER. Oh, yes; very much.

There was something else that I wanted to testify to, but I am so nervous that I can not think of anything. I know that Doctor Logie got very angry because I came and testified the way I did the last time, but I told him that I had to tell the truth. I understand that they say that my husband is very filthy, but while I am there I never see any of it. It may be while I am not there, you know. I could not say; but he is very quiet when I am there. He gets up sometimes and walks out in the hallway.

#### TESTIMONY OF MISS DAISY REYNOLDS.

DAISY REYNOLDS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Miss Reynolds, are you a nurse at St. Elizabeth's?

Miss REYNOLDS. No, sir.

The CHAIRMAN. Are you one of the attendants?

Miss REYNOLDS. No; I am a dining-room waitress.

The CHAIRMAN. Do you assist also in cleaning up some of the wards?

Miss REYNOLDS. Why, yes; sometimes.

The CHAIRMAN. When you have finished your work in the dining room, you sometimes go to some of the wards?

Miss REYNOLDS. Yes, sir.

The CHAIRMAN. Do you know anything in regard to restraining unruly patients? Have you ever seen that?

Miss REYNOLDS. No, sir.

The CHAIRMAN. That you have nothing to do with at all?

Miss REYNOLDS. I have not anything to do with it.

The CHAIRMAN. Have you ever had any particular troubles in the dining room with disturbed patients?

Miss REYNOLDS. No, sir.

The CHAIRMAN. What do you think about the food?

Miss REYNOLDS. Sometimes it is good, and sometimes, again, it is not so good.

The CHAIRMAN. Is the character of the food given to the patients the same as that which is given to you?

Miss REYNOLDS. Yes.

The CHAIRMAN. Where do you sleep?

Miss REYNOLDS. I sleep in the Toner building.

The CHAIRMAN. Do you think there is a sufficient amount of help in the dining room that you are in?

Miss REYNOLDS. Why, I don't know.

The CHAIRMAN. What?

Miss REYNOLDS. Yes.

The CHAIRMAN. I mean can you and the others in the dining room get through with the work that you have to do?

Miss REYNOLDS. Yes, sir.

The CHAIRMAN. What are your hours? How long are you on duty?

Miss REYNOLDS. From 6 o'clock until 5 or half past 5 or 6.

The CHAIRMAN. How often do you have a day off?

Miss REYNOLDS. We have one month day and every other Sunday.

#### TESTIMONY OF MISS AGNES STAPLES.

AGNES STAPLES, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Miss Staples, are you employed in St. Elizabeth's?

Miss STAPLES. Yes.

The CHAIRMAN. What is your position?

Miss STAPLES. I am a waitress.

The CHAIRMAN. Which dining room are you in?

Miss STAPLES. I am in the K building.

The CHAIRMAN. Have you ever had anything to do with restraining unruly patients or anything of the kind?

Miss STAPLES. No, sir. On our ward we have a very good class of patients. Where there have been disturbed patients on our ward we have had to restrain them with the strait-jacket, but we never had very much trouble, except sometimes they will break the dishes, and throw the food and things at one another; but as far as that is concerned, there is nothing else.

The CHAIRMAN. With the exception of breaking the dishes and throwing food, and things of that sort, they do not cause much trouble? [Laughter.]

Miss STAPLES. I call them disturbed when they fight, and beat the nurses and employees, and beat one another. They can do things a great deal worse than to break dishes.

The CHAIRMAN. What do you think about the food there?

Miss STAPLES. The food would be very good if it was cooked properly, but we have very poor cooking at the dining room where I am. At some of the buildings they have very good cooks. At the Q building and the C building they have very good food, but at the Toner kitchen I don't believe the cooks know how to cook at all. In the K building they have prunes most every night, at supper, and they fight a good deal for those. The cooking could be a great deal better.

The CHAIRMAN. Is there plenty of food? Is there enough of it?

Miss STAPLES. Yes, there is plenty of food. We used to have a good deal of trouble in getting enough food, but since the investigation has started we get as much as we want now. I have known patients to go three and four days at a time without sugar. Well, now, we can get all the sugar we want, and tea and coffee. We have plenty of that. We make tea and coffee in the building. We have urns in the small buildings. We frequently have had to send back for meat and such things, at dinner time, and at most all the meals; but now they send plenty, more than we need.

Mr. SMYSER. You say the food is not properly cooked?

Miss STAPLES. No.

Mr. SMYSER. Is that the only trouble with it?

Miss STAPLES. Sometimes the meat is very poor. It does not smell right at all, and the potatoes are never done. If they were cooked right, it would be a great deal better than it is, and no one would have any fault to find; but of course we are working, and we can not expect to get food there like they have at the New Willard.

Mr. SMYSER. They do not have a training school for cooks out there, do they?

Miss STAPLES. Well, no.

Mr. SMYSER. Would it not be a good thing?

Miss STAPLES. I think so. [Laughter.]

Mr. SMYSER. Seriously, when we consider the number of people to be fed that you have out there, they might be trained in a cooking department to some advantage, might they not?

Miss STAPLES. Yes, I think so. And very often the food is not clean. It has cockroaches in it sometimes.

The CHAIRMAN. Do you make complaints of this when it happens?

Miss STAPLES. Yes, we do.

The CHAIRMAN. And is the trouble generally rectified?

Miss STAPLES. Sometimes, but rarely so. I suppose the pans are washed and put up, and they are in a hurry when they get the supper, and I suppose they don't look in the pans and find that the roaches have fell in.

The CHAIRMAN. Then, with the exception of the patients' breaking dishes and throwing food, and having cockroaches in the pans, it is a pretty good place, is it? [Laughter.] How long have you been there?

Miss STAPLES. I came on the 16th of last September, and I was at the C building. I first went there in the dining room, which is a very hard dining room. I had a great deal of trouble in there.

There were only two girls there, Carrie and myself, and we had one patient there—the girls over there have to depend on the patients to help, and if the patients won't help they are very late getting through, and have a very bad time getting through. At the K building we have very good help. The patients will help us out. At some places they have a hard time. They have no special time for getting off. Sometimes they get off at 5 o'clock, which is the earliest, but, as a rule it is 7 and half-past. The girls get through at the C building at 6 o'clock.

The CHAIRMAN. Do you sleep in the grounds?

Miss STAPLES. Yes, sir; at the Toner building.

The CHAIRMAN. Are part of your duties to wash the dishes?

Miss STAPLES. No; one of the patients washes the dishes and I have one that dries them. I set the table and fix the dining room up, and fix the dishes ready to have the meals served. Sometimes other patients come in and help to set the table. The patients' meals come first. While we are at our meals the patients are clearing the dishes off of the table and washing them, and when we get back the dishes are ready to set the tables with.

#### TESTIMONY OF MRS. DORA DORMAN.

Mrs. DORA DORMAN, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mrs. Dorman, how long have you been an employee at St. Elizabeth's?

Mrs. DORMAN. Nine years.

The CHAIRMAN. What are your duties there? Are you a nurse or an attendant?

Mrs. DORMAN. I am an attendant.

The CHAIRMAN. What ward are you in?

Mrs. DORMAN. I am in the J building.

The CHAIRMAN. How many patients are there in your ward?

Mrs. DORMAN. The capacity is 60. At the present time we have 58.

The CHAIRMAN. How many others are there on the ward besides yourself? I mean as attendants.

Mrs. DORMAN. There are two others besides myself.

The CHAIRMAN. Two attendants and one nurse?

Mrs. DORMAN. All three of us are attendants at the present time.

The CHAIRMAN. What is the character of the patients in that ward?

Mrs. DORMAN. Most of them are chronic cases; the majority of them.

The CHAIRMAN. Are any of them bedridden?

Mrs. DORMAN. No.

The CHAIRMAN. Are any of them particularly disturbed?

Mrs. DORMAN. Well, some of them are a little disturbed at times.

The CHAIRMAN. Are they white or colored?

Mrs. DORMAN. They are white.

The CHAIRMAN. Who is the doctor who has charge of your ward?

Mrs. DORMAN. Doctor Hough has charge.

The CHAIRMAN. Does he come there every day?

Mrs. DORMAN. Yes, sir.

The CHAIRMAN. What do you think in regard to the sufficiency of the help on your ward?

Mrs. DORMAN. Well, I think that if we had more help we could use it.

The CHAIRMAN. You could find something for somebody else to do?

Mrs. DORMAN. Yes, I think we could find plenty for them to do if we had more help.

The CHAIRMAN. Do many of your patients have to be dressed, or can they dress themselves?

Mrs. DORMAN. The majority of them dress themselves. We have some that have to be dressed.

The CHAIRMAN. Have you ever seen patients restrained by mechanical means?

Mrs. DORMAN. Well, I have since I have been in the institution.

The CHAIRMAN. Often?

Mrs. DORMAN. Not so often. When I first went there they were restrained quite frequently.

The CHAIRMAN. Is there less restraint now than there was when you first went there?

Mrs. DORMAN. Yes, sir.

The CHAIRMAN. What are the methods of restraint? The use of this camisole?

Mrs. DORMAN. Yes, sir.

The CHAIRMAN. That is never done except by direction of a physician, is it?

Mrs. DORMAN. No, sir; it is never done in my ward.

The CHAIRMAN. It is never done in your ward?

Mrs. DORMAN. No, sir.

The CHAIRMAN. How recently have you seen a patient restrained by this camisole?

Mrs. DORMAN. It has been about a month since I saw a patient in a camisole. I have not been on this ward very long.

The CHAIRMAN. What was the previous ward that you were on?

Mrs. DORMAN. In the M building, an epileptic ward.

The CHAIRMAN. Did you approve of that restraint? Did you think it was necessary?

Mrs. DORMAN. Yes, sir; it was necessary.

The CHAIRMAN. Why? Was the patient liable to hurt somebody?

Mrs. DORMAN. She was liable to injure herself or to injure some one else.

The CHAIRMAN. What do you think about the food there?

Mrs. DORMAN. I think the food could be improved on.

The CHAIRMAN. Do you mean the character of the food, or the cooking?

Mrs. DORMAN. I think the cooking could be improved on. I think that we might have food that is in season.

The CHAIRMAN. Do you have much fruit?

Mrs. DORMAN. No; we have fruit when it is in season.

The CHAIRMAN. Berries?

Mrs. DORMAN. Berries, yes, sir.

The CHAIRMAN. And apples?

Mrs. DORMAN. Apples and grapes.

The CHAIRMAN. Have you ever made any complaint in regard to the character of the food, the cooking, or anything of that kind?

Mrs. DORMAN. Well, I have not; no, sir.

The CHAIRMAN. How about vegetables? Do you have fresh vegetables in the season?

Mrs. DORMAN. Well, we have them, but it is very late. We have not had any new potatoes as yet. It is very late when we get them. We are still using old potatoes. It is usually July or August before we get new potatoes. I think they are usually supplied from the farm.

Mr. HAY. Have you seen any improvement in the food there during the last six weeks?

Mrs. DORMAN. Well, I can not say that I did.

Mr. HAY. On the ward you were on before you were on this ward how many patients did you have?

Mrs. DORMAN. There were forty.

Mr. HAY. And how many attendants?

Mrs. DORMAN. There were two attendants—three. There was one supposed to be in the dining room. One was supposed to look after the dining room.

Mr. HAY. There were three altogether?

Mrs. DORMAN. Yes, sir.

Mr. HAY. What was the character of those patients?

Mrs. DORMAN. They were epileptic.

Mr. HAY. Were they all epileptic?

Mrs. DORMAN. No, not all; about eight of them were epileptic.

Mr. HAY. Were they hard to take care of?

Mrs. DORMAN. Yes; the epileptics are very hard to take care of.

Mr. HAY. Do you think you have sufficient help?

Mrs. DORMAN. No, sir; I can not say that I do think we have sufficient help.

Mr. HAY. Were you ever on the ward when you did not have anybody but yourself?

Mrs. DORMAN. Yes, I am on the ward, and I have to stay on every night by myself, with the class of patients I am with at the present time.

Mr. HAY. I mean on the ward we were just speaking of?

Mrs. DORMAN. You see, this ward is off to itself.

Mr. HAY. The ward you are now on?

Mrs. DORMAN. Both of them were. The M building was off to itself. We can get assistance by phoning for it.

#### TESTIMONY OF DR. HARRY R. HUMMER.

Dr. HARRY R. HUMMER, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor, where did you study medicine?

Dr. HUMMER. I studied from 1895 to 1899.

The CHAIRMAN. Whereabouts?

Dr. HUMMER. At Georgetown Medical School.

The CHAIRMAN. You graduated in 1899?

Dr. HUMMER. I graduated in 1899.

The CHAIRMAN. How long have you been at St. Elizabeth's?

Dr. HUMMER. Since the 2d of September, 1899.

The CHAIRMAN. Did you go there as the result of a competitive examination?

Dr. HUMMER. No, I went there as a medical interne, being appointed by Dr. A. H. Whitmer, who was acting superintendent after the death of Dr. Godding. I had been there a month when I took the civil



service examination for the position of junior assistant physician, and I was successful in that and was appointed shortly afterwards as junior.

The CHAIRMAN. Dr. Godding was succeeded by Dr. Richardson, was he not?

Dr. HUMMER. Yes. Dr. Whitmer was acting, and he made my appointment. Dr. Richardson came in in October, a month and a half after I had been there.

The CHAIRMAN. So that you have been there continuously for six and a half years?

Dr. HUMMER. A little more than that; yes, sir.

The CHAIRMAN. What is your position now; are you junior assistant?

Dr. HUMMER. No; I have been recently promoted to the position of one of the senior assistants.

The CHAIRMAN. What wards have you?

Dr. HUMMER. I have what they call the detached building group. That includes Atkins Hall, the Relief Building, the Home Building, and the Allison Hospital group.

The CHAIRMAN. How many patients altogether are there?

Dr. HUMMER. There are 665, according to this morning's census, sir.

The CHAIRMAN. Are they of all classes?

Dr. HUMMER. They are mostly a chronic quiet class that require custodial care rather than any active treatment.

The CHAIRMAN. Are they white or colored?

Dr. HUMMER. They are all white, and are all men.

The CHAIRMAN. How often do you visit the wards under your control?

Dr. HUMMER. That is subject to a little variation, but usually I am in the hospital ward two or three times a day, or oftener if a case requires, and in the other wards at infrequent intervals. That is to say, possibly I will get through them once a day, except those wards where the patients are out to my knowledge, when I do not visit those wards, but endeavor to see the patients in the general dining hall. Pretty nearly every day I see them.

The CHAIRMAN. Do all of the patients that you have charge of dine in the general dining hall?

Dr. HUMMER. Yes, with the exception of those who take their meals in the hospital. About 125 or 130 dine in the hospital and about 525 or 530 dine in the general dining room.

The CHAIRMAN. Are there many seriously disturbed patients?

Dr. HUMMER. No; that is rather the exception for us to have a seriously disturbed man. We have them occasionally.

The CHAIRMAN. How frequently is it necessary for you to use, or ought you to use, any mechanical restraint?

Dr. HUMMER. Very infrequently, sir, in that department. I have had occasion to use it for various reasons. There is one particular man who made two attempts to jump out of the second-story window, and it was necessary to confine him in bed by means of a sheet across his chest and tied to the sides of the bed, simply to prevent him from jumping out of the window. That was all. There was another man who was in an acute maniacal outbreak, and it was necessary to

restrain him and to keep him from harming himself and those around him. He was restrained in the same fashion with a sheet.

The CHAIRMAN. Does restraint of that character hurt the patient?

Dr. HUMMER. Not in my judgment, sir. I have never seen it hurt any of them.

The CHAIRMAN. Did you ever have any occasion to investigate any charges of cruelty to patients on the part of the attendants?

Dr. HUMMER. Yes. Scarcely a day elapses that we do not have to investigate some charge made by a patient against attendants or other patients. This is a daily occurrence, but it is very unusual for us to find that there has been any cruelty. I can cite you one specific instance, and the only instance that I can think of that happened in that department during my term of service there.

The CHAIRMAN. Was that during Dr. White's administration?

Dr. HUMMER. Yes, sir.

The CHAIRMAN. What was that?

Dr. HUMMER. An attendant, by the name of Acton, maliciously attacked a patient and bruised him up very considerably, after this patient had called him a vile name. The assault occurred after tea, between 5 and 8 o'clock, some time one evening. It was brought to my attention the next morning. I suspended the man, relieved him of his keys, and reported the matter to Dr. White at the earliest opportunity. He investigated the occurrence with me, and we fully convinced ourselves that the attendant was at fault. We discharged him from the hospital, and I myself swore out a warrant against him. We were going to try the case in the courts. The only direct testimony that we had was the testimony of five patients; but the gentleman got wind of the fact that we had sworn out a warrant against him, and he disappeared down in the country somewhere, since which time I have heard nothing of him at all.

The CHAIRMAN. Who was the patient who was assaulted?

Dr. HUMMER. He was a patient by the name of Frank Cullen.

The CHAIRMAN. That is the only instance, of those you have investigated, where you believed there was any truth in the accusation against the attendant?

Dr. HUMMER. That is the only one in which I could find it to be the truth, sir.

The CHAIRMAN. Are the attendants that are under you, generally speaking, humane people, in your opinion?

Dr. HUMMER. Yes, sir; they are most decidedly so. They are the best class of men that I ever saw in that capacity.

The CHAIRMAN. Do you give instructions to the attendants when they first come to the hospital in regard, especially, to their conduct toward and treatment of patients?

Dr. HUMMER. Not I, especially. That is left to the supervisors, the chief supervisor. He has his instructions to always do it, and I believe he does do it. He gives them a book of rules, and tells them their duties, and places them under the charge of a competent head attendant with instructions to the head attendant to see that they do their duty.

The CHAIRMAN. Is there a printed book of rules for the attendants?

Dr. HUMMER. Yes.

The CHAIRMAN. Does it speak especially with regard to the treatment of patients?

Dr. HUMMER. Yes, sir.

Mr. HAY. Will you file that book here?

Dr. HUMMER. I will be very glad to send one over. I did not know that that would come up especially.

The CHAIRMAN. Did you know a man by the name of McKnight?

Dr. HUMMER. Yes, sir.

Mr. HAY. Is this the book to which you refer [indicating a book]?

Dr. HUMMER. Yes, that is the book.

(The above-mentioned book is filed as an exhibit, marked "Exhibit Hummer No 1.") (See page 1748.)

Dr. HUMMER. There is quite a chapter in that book on the duties of attendants, sir.

The CHAIRMAN. Is that the latest edition of it?

Dr. HUMMER. I do not know that there has been any later edition than this. At least, I have not seen it.

The CHAIRMAN. Is that dated?

Dr. HUMMER. This one came from the Government Printing Office in 1900.

Mr. HAY. Has there been anything since then?

Dr. HUMMER. I am sure I do not know.

Mr. HAY. If there has been one since then we would like to have it.

Dr. HUMMER. I do not recall that I have seen any since this. There may be one, but this one answers all purposes. This one has marked here chapter 5, the duties of nurses and attendants.

The CHAIRMAN. Mr. McKnight testified that he saw an attendant by the name of Leaflett knock a man down, a man who was in bed, and blacked his eyes. He said he reported the occurrence to you. Do you remember anything of that kind?

Dr. HUMMER. I remember McKnight reporting an attendant named Leapley, sir. I have no doubt it is the same thing.

The CHAIRMAN. I presume so.

Dr. HUMMER. I have no doubt it is the patient. I must confess that I never found a patient with a black eye on Mr. Leapley's ward, sir. I will say that Mr. McKnight did not get along very well with Mr. Leapley, and I can also say that Mr. McKnight did not get along very well with anybody.

The CHAIRMAN. What was the matter with Mr. McKnight?

Dr. HUMMER. My opinion is, sir, that he is suffering from paranoia, a dementing form of chronic alcoholism, with distinct delusions of persecution; systematized and fixed, and I think there was some deterioration present at the time he left the hospital.

The CHAIRMAN. I was just saying to Mr. Hay that your technical description made me think that I would never drink again.

Dr. HUMMER. That is according to Doctor Peyton's classification. He seems to fit in there as well as at any place.

Mr. SMYSER. Does that long lingo that you indulged in relate to drink?

Dr. HUMMER. I think so, sir; it is one of the consequences.

Mr. WALLACE. Have you been in charge of the so-called bull pen there?

Dr. HUMMER. I have heard it called so.

Mr. WALLACE. That is the way it is referred to in the testimony. Could you describe the inclosure there?

Dr. HUMMER. Well, I am not very good at description, but I will see. It is a park, with an area of between seven and eight acres, I am informed. It is a pretty large park, surrounding my group of buildings, surrounded on one side by a stone hospital wall, and on the other sides—it is rather circular at this side—with a wooden paling fence. It is a very beautiful inclosure.

Mr. WALLACE. How much ground is there for the purpose of recreation, outside of what is covered by the buildings?

Dr. HUMMER. I do not believe I ever gave that very serious consideration, but I should say, roughly speaking, that the buildings do not occupy one-eighth of that space. That is, approximately speaking.

Mr. WALLACE. You have patients there how long? How many years?

Dr. HUMMER. In that department?

Mr. WALLACE. Yes.

Dr. HUMMER. I have one man who was admitted into the hospital in 1859, and it ranges from that time up to the last year or so.

Mr. WALLACE. That must be beyond your recollection?

Dr. HUMMER. It is a little beyond me, sir. It is beyond the date of my birth.

Mr. WALLACE. A number have been out there eight or ten years, I suppose?

Dr. HUMMER. Oh, a number of them. Many of them have been there twenty or thirty years.

Mr. WALLACE. Just give us a description of the daily lives of the old soldiers, as to what they do.

Dr. HUMMER. They get up, and they are supposed to be up and dressed about six o'clock in the morning, and those who are able to assist in making the beds and generally cleaning up the wards, until breakfast time. The breakfast is served anywhere from half past six to seven or half past seven. Sometimes it is a little late on account of the firemen coming in late, or not coming in. After breakfast they return to the ward, to be mustered in, to show that the full complement of patients are on each ward; after which the parole patients are allowed to go out unattended. Some of them have the entire parole of the hospital grounds. Some of them have parole within this inclosure, and that is all. So many of the patients, under the charge of attendants, are taken out walking during all of the good weather.

We endeavor to send them out twice a day in good weather. They are supposed to be kept out sufficiently long, just to enable them to return to the ward before the dinner bell rings. They get in here regularly, anywhere from half past ten to half past eleven. They are then again counted and mustered in the ward, and they wait then for the dinner bell which rings about twelve o'clock. I am speaking now outside of the hospital wards. Of course the patients in the hospital wards are in bed. They then go to dinner, which usually lasts from 12 o'clock until about half past, when they are again taken to the wards just after dinner. Then the parole men turn out, and half of the force of attendants go to their dinners and the remaining half of the force are on the wards with the other patients who are not paroled. This first set of attendants returns after their dinner and the second set go. They remain on the wards, and are

supposed to remain until the other attendants get back from their dinner. Then they are supposed to go out walking again, and in good weather they do.

Mr. WALLACE. Outside of the inclosure?

Dr. HUMMER. Outside of the inclosure. My predecessor usually had all of these men turned out just inside of the inclosure, with the attendants stationed at intervals along the fence to see that they did not get over, but I asked them to take them out walking all through the ground. They are supposed to stay out until pretty nearly supper time. They have supper at half-past 4. They get in about half-past 3 or 4 o'clock and have supper at half-past 4, and return to the wards, except the number of men who are paroled until 7 o'clock, and a few who are paroled until 8. There is one man, the only one that I recall, who is paroled until 9 o'clock, in my department. They are returned to the wards after supper and the attendants have to go—half of them—to their meal, and when the man who goes to supper first returns to his ward, that relieves the other man and the second man goes off duty. Then the first force of attendants are on duty from about 5 o'clock until 8, and the patients are then counted in the wards.

Mr. WALLACE. Could you suggest any improvement over that, Doctor, for the benefit of the patients, physically or mentally, or do you think that is sufficient?

Dr. HUMMER. Well, of course we would like to see them get everything we could possibly give them, but under the present circumstances I do not see how it is possible to give them any more.

Mr. WALLACE. You spoke of some that perhaps did not get outside of the inclosure. What character of patients are they?

Dr. HUMMER. There are a number of epileptics, especially, and a number of chronically demented men, who would not recognize the limits of the hospital grounds, and yet would be kept in by this fence. There are a number of openings in the hospital grounds. There are a number of gates, and the subway, and the wall is down in one place in the ravine, I believe, and the men would be apt to get into some trouble, or not return to the wards at mealtime.

Mr. WALLACE. A character of patients who would like to escape if they could?

Dr. HUMMER. Some of them, but I do not make any distinction as to those who would be likely to escape, for the simple reason that those who would like to escape could escape as well from the inclosure as from the grounds proper. It is no trouble to climb the fence.

Mr. WALLACE. Do they have attendants with them when they are out of that inclosure to look after them?

Dr. HUMMER. All of them who are not paroled have attendants with them, but those who are paroled go about the grounds by themselves, and a few come to town.

Mr. WALLACE. Do the epileptic patients have the privilege of this inclosure too?

Dr. HUMMER. Not all of them. There are a number whom we can not trust outside of the eye of the attendant. There are just a few of the more comfortable who have epileptic convulsions at fairly regular intervals—I mean, especially, at mealtime or at night, and a number of cases only have them at night—and such cases as we feel

safe with, we allow to go from under the eye of the attendant. We allow them inside of that inclosure, too.

Mr. WALLACE. What special treatment do you have for the epileptics?

Dr. HUMMER. The special treatment that they are getting at the present time is mostly custodial care. I have tried the various treatments with certain degrees of success, and certain degrees of unsuccess.

Mr. WALLACE. Are they separated in the wards with respect to the degree and character of their disease, or are they simply classed as epileptics?

Dr. HUMMER. We have all of the epileptics, except a feeble class, in two wards, relief one and four. The feeble class are on the lower floor of the hospital, Allison B one and Allison D one—we have a few. Just to suit their cases, we endeavor to put them where we can best care for them and where they will get along best.

Mr. WALLACE. Do all of these epileptics who are able to go to the table eat with the old soldiers?

Dr. HUMMER. Yes.

Mr. WALLACE. At the same table?

Dr. HUMMER. Not at the same table, but in the same dining hall. They have their special table, sir.

Mr. WALLACE. They have the same food, etc.

Dr. HUMMER. They have the same food, with some distinctions. They are not allowed to have anything that we think will upset them in the nature of corned beef or cabbage, and heavy indigestible food.

Mr. WALLACE. Would you consider that class of patients, under those circumstances, as segregated or separated from the others?

Dr. HUMMER. Well, they are separated on the wards, you understand, and they just come into this general dining room because there is no other way to care for them in that department. I myself have already asked to have them removed to another building, and my idea was to get them into a separate building entirely, with a day room downstairs and a dormitory upstairs, where they can be under the eye constantly of the attendants and nurses. I think they can be better cared for there.

Mr. HAY. You are speaking of the epileptics now?

Dr. HUMMER. Yes, sir; the epileptics. At the present time the wards they are in does not meet my idea of being the ideal ward in which to care for them. I have asked for a change in that respect and it is under advisement.

Mr. WALLACE. Do any of these epileptics go out on the grounds there?

Dr. HUMMER. Yes, sir.

Mr. WALLACE. Some of them can go, I suppose?

Dr. HUMMER. Yes; we endeavor to give those who are able parole in pairs, so that one of them will look after the other, and if the other has a fit he will return to the supervisor's office and report that this man is having a fit in order that we might send out for him.

Mr. WALLACE. In that way you have two chances to one the other way?

Dr. HUMMER. Yes; I think so. They are very good, one to another, and they will always look after one another when they fall in a fit.

The CHAIRMAN. Doctor, there was a woman by the name of Roland who testified that she had a son who was at St. Elizabeth's and that last month she went over there and found the son had a pair of black eyes. Do you know anything about that? That was in the Atkins Hall. She tells us that she made complaint to Doctor Logie, but I thought as it was in Atkins Hall you might know something about it.

Dr. HUMMER. Yes; this man Roland, Mr. Olcott, has been in my wards and he was transferred to Dr. Logie's department from my ward. I do not remember positively about this affair, but if my memory serves me correctly this boy did get a black eye, or possibly a cut, I can not remember which, and I sent one of my men—either one of my assistant supervisors or an attendant—over to her house in town. She lived in the southeast section of the city and he informed her that the boy had received this bruise or cut, as the case may be, at the hands of another patient, as I remember it, and asked her would she come over at her earliest opportunity and see the boy. We told her that it did not amount to anything, but we wanted her to see it. She came over and saw it. I had a talk with her about it, as near as I recall. It has been some time ago.

The CHAIRMAN. When she did come over and she did look at it, did she express any dissatisfaction at the way you had treated her?

Dr. HUMMER. Not to me, sir. She seemed very glad that I had informed her that it had occurred and she seemed to think that was all we could do under the circumstances. I remember the boy. He was a very irritable somebody and is constantly getting into trouble with the other patients. He goes up to them and slaps them without any apparent cause. He will go up to them and curse them and they will not stand it.

The CHAIRMAN. How long has he been there?

Dr. HUMMER. I can not say, sir; I don't remember. He had been with me a number of months before he was transferred to Doctor Logie's department.

The CHAIRMAN. Do you know anything in regard to the case of a boy or a man by the name of Donaldson?

Dr. HUMMER. Archibald C. Donaldson?

The CHAIRMAN. I suppose so.

Dr. HUMMER. I have a patient under me by that name, sir.

The CHAIRMAN. There was a Mrs. Goodrich who testified that her attention had been called to the condition of his neck; that he had been choked; that she called your attention to it and you very lightly huffed at it. I do not know what huffed means.

Dr. HUMMER. I have a very faint recollection, sir, that a year or so ago Mrs. Goodrich had been in the grounds with this boy's mother. They had been consoling with one another.

The CHAIRMAN. That is the case.

Dr. HUMMER. Mrs. Goodrich did call my attention to the fact that this boy had been choked and I looked at the boy at the time and found absolutely no evidences of his having been choked and so expressed myself. I do not remember what words I used.

Mr. HAY. Doctor, what is the view in the hospital as to cases where patients make an attack on attendants? What are the attendants supposed to do? Are they supposed to take care of themselves in self-defense?

Dr. HUMMER. Yes, to a certain extent they are supposed to protect themselves, absolutely as much as they can without hurting the patient. They are forbid to hurt the patient. I would like to tell you of one instance where two of these epileptics had one of my attendants down on the floor, one of them sitting on top of him and pounding him in the face, and another rushing for a chair with which to hit him in the head, when another patient, another epileptic, came along and struck this man, hitting him on the jaw. We thought that he had fractured his jaw, but it developed later that it was not fractured. He knocked him completely out, and we had him in the hospital for nearly two weeks from the blow. It is a very frequent occurrence that the patients attack the attendant, and it is absolutely necessary for the attendant to protect himself.

Mr. HAY. To what extent?

Dr. HUMMER. To the extent of getting rid of the patient without hurting him. I have examined many patients there, who have complained to me that they have been beaten by an attendant, and I have looked into the matter and found that they had attacked the attendant and the attendant had defended himself. I have never found that the patient has been injured, never that I can recall, in any case.

Mr. HAY. Do you think that that is the proper idea for these attendants to have, that they should defend themselves?

Dr. HUMMER. Oh, the attendants' primary instruction is never to hurt a patient.

Mr. HAY. I understand that.

Dr. HUMMER. But I think that self-preservation is about the first law, and a man——

Mr. HAY. That is true, self-preservation is the first law of nature.

Dr. HUMMER. And a man must protect himself when he is attacked; but I have never found any evidence that the attendant has maltreated the patient any more than was absolutely necessary to get rid of him.

Mr. HAY. What I want to get at is whether or not the general idea among the attendants is that that is encouraged by the superintendent and the physicians in charge of the different departments—that they are permitted to strike, if necessary, in self-defense.

Dr. HUMMER. I do not think they have any such notion, that they can strike, sir. They can only protect themselves by clinching. I do not believe they get any notion that they can strike a patient, and I think it is drilled into them that they are never under any circumstances to hurt a patient.

Mr. HAY. That is the impression that has been made upon my mind by a great many of the attendants who have been here, and who say as you do, "Well, self-preservation is the first law, and we must look out for ourselves."

Dr. HUMMER. They get that idea from themselves. I do not believe they get that from the hospital authorities, sir. I do not believe it would be encouraged; but we would tell them that if necessary, if the case came up, that we do not expect them to stand up and let a patient pummel them.

Mr. HAY. If you have attendants enough to always restrain, and be on hand to restrain any attempt of that sort on the part of the



patient, would there be any necessity at any time for any attendant to strike a patient?

Dr. HUMMER. I do not believe there would, sir. I believe, as a rule, the attendants are able-bodied men as compared with the patients, and it would be an exceptional occurrence when they would have to strike a patient. I do not know of them ever having struck a patient. They have clinched. They have put the man in a room and reported to the supervisors, and at the orders of the physician they have restrained the man; but I do not know of any case where an attendant has ever struck a patient, even in self-defense.

Mr. HAY. Well, those things might be done, I suppose, and you not know anything about it, might they not?

Dr. HUMMER. This one case happened that I have cited.

The CHAIRMAN. I think we had better take our recess.

(The committee, at 12.13 p. m., took a recess until 2 o'clock p. m.)

#### AFTER RECESS.

#### TESTIMONY OF DR. HARRY R. HUMMER—Continued.

Dr. HARRY R. HUMMER resumed the stand for further examination.

The CHAIRMAN. Proceed with your examination, Mr. Hay.

Mr. HAY. Doctor, how many old soldiers have you in your department? I say "old soldiers," but I mean how many soldiers have you?

Dr. HUMMER. I can only approximate that. I did not look it up. We figured up the soldiers and sailors as against the citizens in that department a few weeks back, and I think we had a little more than two-thirds soldiers and sailors in that department.

Mr. HAY. Do you remember about the case of a soldier there by the name of Logue?

Dr. HUMMER. Yes; I remember Logue.

Mr. HAY. He was discharged as cured how long ago?

Dr. HUMMER. I think it was in the early part of December, if my memory serves me rightly.

Mr. HAY. Do you remember what his disease was? What was the peculiar character of his trouble?

Dr. HUMMER. Yes; I remember Logue's case fairly well. This was a recurrent mental disease, due, in at least two instances, to the excessive indulgence in alcoholics. According to the history, he had been in the hospital on two occasions, once before I was there and the last time he came in, I think, before I came to the hospital. He was there, certainly, in my term.

Mr. HAY. He was there the last time, he testified, about seven years.

Dr. HUMMER. I think it was about that, sir. He came in the latter part of the nineties on the last trip. Both times were close together. He was in the hospital for a few weeks and was soon discharged, and he had not been out but a few weeks, or two or three months, when he was readmitted.

Mr. HAY. He has testified that he had trouble in getting his pension, or in getting what had accrued to him on account of what was due him on his pension. Do you know anything about that?

Dr. HUMMER. No; I don't believe I do. Do you mean that when he came out of the hospital, after he was discharged, he had trouble?

Mr. HAY. Yes. Well, if you do not know that, do you know why he had a guardian appointed?

Dr. HUMMER. I do not believe I know, sir, that he ever had a guardian.

Mr. HAY. You do not?

Dr. HUMMER. I do not remember it. Oh, yes; I beg your pardon, sir. Mr. Fenning was his guardian at one time.

Mr. HAY. Yes, and is yet.

Dr. HUMMER. I do not remember anything about that.

Mr. HAY. Were you not summoned to appear and give evidence as to the condition of his mind?

Dr. HUMMER. About the time he was discharged, yes, sir. Some one swore out a writ of habeas corpus, I think, in this case, and it was sprung on us pretty suddenly when we were not looking for it. This man's particular case I had put before Dr. White and had advised that I thought the man was ready for discharge, and his discharge was under advisement when all of a sudden there was a writ of habeas corpus served from somewhere—I don't know where.

Mr. HAY. After the writ of habeas corpus had been granted and the man had been discharged under the proceedings, under the writ, were you not summoned again to give your testimony as to the condition of his mind?

Dr. HUMMER. In the case of Logue, I think not, sir; I do not recall it. I wonder if you are not thinking about Bastin?

Mr. HAY. No; I am thinking about Logue.

Dr. HUMMER. No; I do not remember ever having been summoned again in his case.

Mr. HAY. It appears from the court record that you were summoned——

Dr. HUMMER. I carried the patient over to the court, myself, on the writ of habeas corpus.

Mr. HAY. I mean after that; after the man had been discharged under the proceedings on the writ.

Dr. HUMMER. I am sure I do not remember that, sir.

Mr. HAY. You were paid a fee in the case.

Dr. HUMMER. No; I am sure I was not; not in the Logue case.

Mr. HAY. It is in the court records.

Dr. HUMMER. That is the Bastin case, sir.

Mr. HAY. No; I was interested in the Logue case, because the man gave his evidence here.

Dr. HUMMER. I do not recall that circumstance.

Mr. HAY. The record does not seem to be here, Doctor. How many of these cases have you appeared in?

Dr. HUMMER. You mean in court, altogether, sir?

Mr. HAY. Yes, sir.

Dr. HUMMER. Why, I never stopped to calculate it. I suppose forty or fifty, and possibly more.

Mr. HAY. You are the physician from the hospital who is always called upon?

Dr. HUMMER. Only when the patient is in my department, sir. Not for any other department.

Mr. HAY. Most of these cases have come up from patients who were in your department?

**Dr. HUMMER.** I believe the majority of the cases where a guardian has been appointed recently have been from my department. I think we have most of those.

**Mr. HAY.** Owing to the fact that you have a large proportion there of these soldiers and sailors?

**Dr. HUMMER.** Those old soldiers who have served their time out in the hospital, who have been sent to the hospital and served their time out there and have never been paid. Nowadays I believe they discharge the soldiers shortly after they come to the hospital. Sometimes they are discharged before they reach here, while they are on the way.

**Mr. HAY.** Well, they not only get pay from arrearages of pay, but then they get—

**Dr. HUMMER.** Clothing, money, and transportation.

**Mr. HAY.** I know; but some of them have their pensions, do they not?

**Dr. HUMMER.** Pensions?

**Mr. HAY.** Yes.

**Dr. HUMMER.** I really have nothing to do with pensions.

**Mr. HAY.** But that was the case of the man I was just talking about.

**Dr. HUMMER.** Logue?

**Mr. HAY.** Yes.

**Dr. HUMMER.** I am sure I do not know a thing about his finances. I do not believe I could tell you a thing—

**Mr. HAY.** No; but I mean the patients—the soldiers there—a great many of them are men who draw pensions?

**Dr. HUMMER.** Oh, yes, sir.

**Mr. HAY.** That is what I am trying to get at; and frequently that has accrued before the passage of this law of about a year ago?

**Dr. HUMMER.** Yes; there have been a number of those cases, I believe. I can cite one case. One of those cases is that of a man who came into the hospital in 1879 and died in either the latter part of 1905 or the early part of this year. His brother had the remains carried up to Massachusetts. In that case we took the initiative and tried to trace up his pension, at the brother's request, in order to have enough money there to bury him when he did die. He was diseased at the time.

**Mr. HAY.** Have you not a fund there for the purpose of having these people buried?

**Dr. HUMMER.** Doctor White, out of his one-sixth of the accrued pension, paid all the funeral expenses.

**Mr. HAY.** I do not mean in that particular case, but in the case of a soldier dying there. Suppose he has not got any pension and suppose he has not got anything?

**Dr. HUMMER.** He is buried in the soldiers' division of the hospital cemetery if he has nothing.

**Mr. HAY.** What sort of a burial does he have? What kind of a coffin does he have?

**Dr. HUMMER.** He has a very plain pine box. I believe, sir, that is varnished. It is stained and varnished.

**Mr. HAY.** And it is furnished by the hospital?

**Dr. HUMMER.** It is furnished by the hospital. The soldiers and sailors are wrapped in the flag, I think. The citizens are not. They

are buried in a different portion of the same cemetery, too. One is the soldiers and sailors' division and the other is the citizens' division.

The CHAIRMAN. Doctor, you testified in the Bastin pension case, did you not?

Dr. HUMMER. I do not believe I testified in the Bastin pension case, sir. I think I testified after he had been discharged from the hospital as to his mental condition, at the time of my examination. I suppose that is what you mean.

The CHAIRMAN. Yes, perhaps that was it.

Dr. HUMMER. This man was discharged from the hospital, he having entirely recovered his normal mental condition, so far as we could say. We discharged him, and at the time of his discharge he had a committee, Mr. Fenning. All the funds at the hospital, I believe, with the exception of about \$175—no, I think it was about \$200—were turned over to the guardian, his committee, before he was discharged. To tell you the truth, I don't believe I know how this came about. Before he was discharged from the hospital this committee succeeded in getting him an increase of pension. He was at that time a pensioner at the rate of six dollars a month, and he got him an increase, so that he would get \$17 a month, and got him a lump sum—the difference between six and seventeen dollars a month—that had accrued for some time, I don't know how long. Anyhow, it amounted to as near as I remember about \$2,100. At the time, or just before the time, of his discharge from the hospital about \$1,900 were turned over to Mr. Fenning, I think—the committee—leaving about \$200 there at the hospital, or \$175, I don't know which. Anyhow, when we went to figure it up he had drawn another quarter's pension of \$51. It must have been \$200, because when we went to figure it with this other quarter's pension it made \$251 left to his credit, I think, at the time he was discharged. Out of this money the hospital was to get his board from the time of the passage of the act of February 20, until the date of his discharge, which, as near as I remember, was about the 8th day of June, 1905. That lump sum of \$200 was just left there to cover it. We did not know how long he was going to be in the hospital at the time that was left there, but we knew that his discharge was under consideration at that time; so they left the lump sum. This was finally disposed of after several letters to the Secretary of the Interior, but I don't know just how much they did allow the hospital out of that. Anyhow, the rules and regulations of the committee appointed by the Secretary covered that point. This man had an attorney who looked it up for him and recovered most of that money—I do not know how much. That is all down in the hospital records.

The CHAIRMAN. Did you testify in regard to Bastin's mental condition?

Dr. HUMMER. He was discharged about the early part of June, I think the 8th day, sir; and a few months later Mr. Fenning called me up over the 'phone and said that he wanted me to examine this man at that time. That was in the fall of 1905, and he asked me to give him an opinion as to his present condition; that is, his condition in the fall of 1905, several months after his discharge. I examined him in company with Dr. Nevitt, who is at present the coroner of the District, I think. We examined him in Dr. Nevitt's office. I believe Dr. Emmons has an office in the same building, on Four-and-

a-Half street here. I do not know how long we were here, but about three-quarters of an hour or an hour, talking to the man, in the presence of his attorney, whose name was Croxdale. As a result of that examination I wrote Mr. Fenning a note, telling him that I found absolutely nothing the matter with the man at all; that I thought he was completely cured. I did not testify any more in the case. I would not be surprised if my note to Mr. Fenning was handed into the court, stating the result of my examination.

The CHAIRMAN. Did you get paid for your services in the Bastin case?

Dr. HUMMER. Yes; I got a fee of \$25 for examining that man.

The CHAIRMAN. Who paid you that?

Dr. HUMMER. Mr. Fenning paid me.

The CHAIRMAN. Was that paid after an accounting in court?

Dr. HUMMER. I am sure I don't know, sir. I think Mr. Fenning arranged that. He told me that he had asked, I think I am right when I say Justice Anderson, if he, the Judge, would give Mr. Fenning permission to have this man examined by two physicians. The Judge—

The CHAIRMAN. Who was the other physician?

Dr. HUMMER. The other physician was Dr. Nevitt, Coroner Nevitt. He is now Coroner for the District. As near as I remember, the Judge said, "What do you expect to pay these men for their services?" "Well," he says, "a reasonable amount." The Judge says, "What do you suppose is a reasonable amount?" He said: "I should think a fee of \$25;" and I am informed that the judge signed an order authorizing him to pay two physicians to examine this man a fee of \$25 for their services. Of course that is hearsay.

The CHAIRMAN. Were you paid in all of these proceedings that you speak of?

Dr. HUMMER. Not at all, sir. I have, since March of 1905, received fees in 14 cases, and I looked it up sometime back, and I had at that time testified in 32 or 33 cases; and since that time I have testified in a few more, four or five more.

The CHAIRMAN. What is the usual compensation given in these cases?

Dr. HUMMER. Usually the compensation is \$10, sir.

The CHAIRMAN. Then why was \$25 given to you in the Bastin case; do you know? Was that a harder case?

Dr. HUMMER. I only know that Mr. Fanning told me the judge authorized him to pay \$25.

Mr. HAY. What charge did you make yourself? Did you make any charge yourself, or just leave it to Mr. Fenning?

Dr. HUMMER. Mr. Fenning called me up and said, "I think you are entitled to a fee for your services here," and I said "all right, I will accept a fee."

Mr. HAY. You did not fix the fee?

Dr. HUMMER. No; I don't believe I said a word about a fee. I think he arranged that with the court, as near as I remember. I can not be positive; I do not remember positively these cases.

The CHAIRMAN. Do you know this Maenche, who has been mentioned so frequently in this testimony?

Dr. HUMMER. Yes, sir.

The CHAIRMAN. Did you ever know of any complaints against him, as being drunk?

Dr. HUMMER. I know of no such complaint, sir, only what I have seen since the investigation started. I do not know anything about the man at all. It is the rarest thing in the world that we ever come in contact.

The CHAIRMAN. There was a man by the name of Hodges, who testified that there were two attendants by the name of Browning and Green, who got to fighting in one of the dining rooms there after the patients were asleep. Did you have anything to do with investigating that matter?

Dr. HUMMER. No, sir; that was not in my department at all.

The CHAIRMAN. You had nothing to do with it?

Dr. HUMMER. No, sir; I heard of it.

The CHAIRMAN. I thought you did.

Dr. HUMMER. No; Dr. Schwinn was the physician in charge of those men.

The CHAIRMAN. Dr. White testified that the staff is—he used the expression, I think—“responsible for the discovery of patients who are entitled to pensions.” What do you do when you find that there are patients that you have there who are entitled to pensions? Do you take the initiative in seeing that they are secured for them?

Dr. HUMMER. It is very seldom that we have anything like that brought to our attention. When a man becomes sick, and we think there is any danger of his dying, one of the first things we do is to look up the record and see if this man has any relatives, and if he has we endeavor to reach them by letter or by telegram, to notify them of his condition. Then about the second step is to see if he has any money to his credit, in order to discover whether we can bury him out at Arlington, or send the remains away, or bury him at the hospital cemetery. That is done because we have to sign a death certificate, and on the death certificate, if he is to be buried at the hospital, we have to sign the undertaker's portion of the death certificate. If the remains are removed, the undertaker signs that.

The CHAIRMAN. There has been something said here in regard to card playing. Did you ever hear of any case where cards were played for money by the attendants and patients?

Dr. HUMMER. Not by the attendants and patients, sir. I have heard that some of the patients played cards for money, but as far as I know there were no attendants in that game. I understand, and my authority is the policeman there, Mr. Clark—he came to me on one occasion and reported to me that there was a game going on in the smoke room. This particular smoke room is under the bakery, attached to the kitchen of the hospital.

Mr. Bastin was one of the players. He was my patient at the time, and that is the reason I was informed, and Mr. Meehan, who has since died, was also a player. I had these two men up in the office, and I told them that we did not approve of such methods and asked them if they would not stop it, and I told them that if they did not stop it I would feel compelled to withdraw their parole privileges in order to stop it. I was informed later by Mr. Clark that they had stopped, and still later he discovered them out on the side of the hill again. They had simply shifted the scene of operations. I again called them into the office, and they both swore to me they would not

play any more if I did not take away their parole. I took their words for it, and let them continue to enjoy the parole privileges, and since then I do not believe I have heard of any other.

The CHAIRMAN. Doctor, what are your hours of service out there?

Dr. HUMMER. Well, sir, I am supposed to be on duty at 7 o'clock in the morning, and it is very seldom that I am off. I am there at the hospital at all times, day and night, except when I am in town on business. I can get off practically whenever I ask for it, by going directly to the superintendent, and by getting some one to relieve me while I am out, but I have been out very little. I do not believe I come to town once in two weeks.

The CHAIRMAN. How often do you take vacations?

Dr. HUMMER. I have had one month and three weeks' vacation in nearly seven years.

The CHAIRMAN. Was that all at one time, or at separate times?

Dr. HUMMER. No, I had one month at one time and two weeks at one time and one week at another time.

The CHAIRMAN. And were these all the vacations you have had in seven years?

Dr. HUMMER. That is all the vacations I have had. I was out of the hospital on two occasions for a few days, when I was sick with tonsillitis.

The CHAIRMAN. Did you ever play cards out on the grounds for two or three hours at a time, in the afternoon?

Dr. HUMMER. I have played cards in the grounds for about an hour and a half at a time, sir. Very frequently I have played from 3 o'clock, the time when two of the night watchmen get up out of bed. Two of the night watchmen and one or another patient and myself have played a game of pedro out in the grounds under the trees, from about 3 o'clock until half-past 4, at which time patients went in to supper and the night watchmen got ready for their supper.

Mr. SMYSER. Did you ever play seven-up?

Dr. HUMMER. I don't believe so, sir—not as severe a game as that.

The CHAIRMAN. That was when the patients were out, was it not?

Dr. HUMMER. Yes, sir.

The CHAIRMAN. And when you had not any duties to perform?

Dr. HUMMER. When I felt that I could be spared from the ward.

Mr. SMYSER. I asked you the question about seven-up, because seven-up is the only genuine sportsman's game in Virginia and Ohio.

Dr. HUMMER. We did not feel that we were sportsmen. We were just playing a social game of pedro.

The CHAIRMAN. But nothing of that kind was ever done that caused you to neglect your duties in any way?

Dr. HUMMER. I do not think anyone can say I have neglected my duty, sir.

The CHAIRMAN. You say that during the whole seven years the sum total of your vacations has been one month and three weeks?

Dr. HUMMER. That is correct, sir; strictly correct.

The CHAIRMAN. What do you think about the food at the hospital?

Dr. HUMMER. Well, sir, my opinion is that there is quite a difference between the food served to those able-bodied patients and to those patients who are confined to the hospital sick. The sick patients have a special diet, an extremely liberal diet. They get a

large quantity of eggs and milk, and specially prepared food; that it is absolutely impossible to give to these patients in the general dining hall. I can give you the quantities of milk that I use in the hospital wards, if you wish it.

The CHAIRMAN. I think it would be very valuable to have it.

Dr. HUMMER. In the hospital wards we use 17 dozen eggs daily, and 35 gallons of milk. That is for about 125 to 130 people. It varies a little as to the number of men taking their diet there.

The CHAIRMAN. How often is that given to them?

Dr. HUMMER. Daily; they have 17 dozen eggs and 35 gallons of milk. That is in addition to the other things they get. The sick men are frequently given milk between meals and at night; two or three times if they are awake and want it.

The CHAIRMAN. There is not any milk generally given to the other patients, is there?

Dr. HUMMER. No, sir; not in my department. They use about 17 gallons of milk in the general dining-hall kitchen, three days in the week, and 14 gallons the other days in the week in preparing certain foods, but they do not get any milk to drink except occasionally we can slip a pitcher of milk away, and take it to a special case in the other wards. I had occasion to do that yesterday. There was a man who would not come to his meals, and would not eat or drink, and I gave him three glasses of milk from my hand at supper time.

The CHAIRMAN. Did you ever know anything of feeding the patients with the feeding tube?

Dr. HUMMER. Yes, sir; I have done it myself.

The CHAIRMAN. Did you ever know of anything of that kind being done in the way of punishment, or for vindictive purposes, or anything of the kind?

Dr. HUMMER. No, sir; I can say positively that I do not. I believe I am safe in saying that we have saved the lives of several patients by using the feeding tube. Patients have refused absolutely to eat, and they would starve to death, but we would not allow them to; and finally after feeding them in some instances for just a few days, they began to eat all right, and some of them are there yet; and I would not be surprised if some of them had been discharged from the hospital as recovered. I can not recall any individual cases now.

The CHAIRMAN. That method of feeding has never been used except for the benefit of the patients, has it?

Dr. HUMMER. It is always used for the benefit of the patient. I never heard of its being used as a disciplinary measure until I read it in the paper since this investigation started.

The CHAIRMAN. It is rather an unpleasant operation to perform anyway, is it not?

Dr. HUMMER. It is not pleasant for the physician. He frequently gets milk all over him. I do not know how it is with the patient.

Mr. SMYER. Doctor, a witness here yesterday testified that within a couple of weeks out there you had meat that was tainted so that the employees at the dining table spit it out in their hands, and could not eat it. Do you know anything about that?

Dr. HUMMER. I do not, sir. I know that lady was employed at the hospital as an act of charity after her husband had left the hospital,



some reason or other. I do not recall what. I do not believe the lady is a necessary adjunct to the hospital at the present time.

Mr. HAY. You do not mean to say that—

Dr. HUMMER. I mean her services are not such that her place can not be filled.

Mr. HAY. Do you mean to say that you are going to fill her place?

Dr. HUMMER. I do not mean anything of that sort. I do not know anything about that. I happened to see the lady in the grounds. My attention was called to her yesterday afternoon about half past four or possibly five o'clock, as being the lady who made that statement. The Times paper was there at the time, and I had just read the article and asked who was this Mrs. Dean, I think, and the supervisor says, "Here she comes across the walk." He said, "She was just employed here as an act of charity, after her husband left the hospital."

Mr. HAY. Then you do not know that she was employed as an act of charity, except from what you heard, do you?

Dr. HUMMER. No, sir; only that. I never saw the woman to know that she was Mrs. Dean. I, perhaps, have seen her in the grounds, but I did not know who she was.

Mr. SMYSER. I do not care about the character of the employment, but what I am interested in is the character of this meat that was served within two weeks.

Dr. HUMMER. I do not know anything about her dining room. I do not know where she dines. I have never seen any tainted meat in my department.

Mr. SMYSER. She says it is in the general dining room. I will read what she says: "At what table do you eat?" and she says, "It is a sort of a general dining room, where the employees of the sewing room, the sewing-room people, and the nurses, and some of the cooks eat."

Dr. HUMMER. I believe I know where that dining room is, sir, but I never see any of the food that is served in it.

Mr. SMYSER. Did you hear of any such complaints out there as I have indicated from the character of the question?

Dr. HUMMER. I do not believe I have, sir. I have heard the attendants and employees complain that the meat was tough, and that they could not eat the oleo, but I do not recall ever having heard that it was tainted.

Mr. SMYSER. She says that it is often not fit to eat, and it is put on the table and not touched. What do you know about that state of facts?

Dr. HUMMER. I can state that that does not apply to my dining room, sir, and I do not believe it applies to any of my wards. I have never seen any tainted meat.

Mr. SMYSER. Does it apply to any other ward that you know of?

Dr. HUMMER. I judge that all of the wards are about the same, sir. I do not believe that mine have it any better than any others.

Mr. BARCHFELD. Are the indigent patients from the District who die buried in the same manner as the soldiers and sailors?

Dr. HUMMER. With the exception of the flag around the coffin, I think the burial is the same; and, as I indicated before, they have a separate portion of the hospital cemetery.

Mr. BARCHFELD. Do they have the same style coffin?

Dr. HUMMER. I think so, sir. I do not believe there is any difference. I have never noticed any.

Mr. BARCHFELD. A good many of your epileptics are old soldiers, are they not?

Dr. HUMMER. Yes, sir; I feel perfectly safe in saying that fully half of them are soldiers and sailors.

Mr. WALLACE. Do you ever have any burial service, and if so, of what kind?

Dr. HUMMER. The Episcopal service over the dead at the hospital cemetery.

Mr. HAY. Who reads it?

Mr. WALLACE. Yes, who reads it? A minister, or who?

Dr. HUMMER. No; the physicians from the hospital, in the service where the patient dies.

Mr. BARCHFELD. What is your line of treatment for epileptics?

Dr. HUMMER. I said this morning that it is practically, in my department, custodial treatment, sir. We have tried the usual prescribed treatment of bromide and simulo, and have used the various diatetic and hygienic measures with varying degrees of success. At the present time I have about reached the point where I believe it is best to let them alone except in special cases. If a man is having a series of convulsions, we will give him medicine to stop it, or if he gets into status epilepticus, we will treat that; but generally speaking there is no special line of treatment at the present time.

Mr. BARCHFELD. You have that large dining room out there?

Dr. HUMMER. Yes, sir.

#### TESTIMONY OF A. W. THOMAS.

A. W. THOMAS, having been duly sworn, was examined and testified as follows:

Mr. SMYSER. What is your name?

Mr. THOMAS. My name is A. W. Thomas. I am a member of the District bar, and practice here in Washington.

Mr. SMYSER. What do you know about St. Elizabeth's Hospital?

Mr. THOMAS. In connection with R. P. Evans, with whom I am associated, I have had several habeas corpus cases, in bringing inmates before the courts. Among those are the cases of Mr. Logue, who, I understand, has testified here, and the Corbetts, and other cases. I drew the writ, and brought the writ in the court proceedings in the Logue case, and in that case I found that Mr. Frederick A. Fenning, a member of the law firm of Coldren & Fenning, of this city, practicing attorneys, was committee; and it also came to my knowledge that he was committee in several other cases of inmates there. In the course of the preparation of that case I examined the records of the supreme court, so that I might find for the benefit of the court and for the benefit of my client the particular interest that Mr. Fenning might have in his retention in the hospital, to ascertain whether Mr. Fenning's interest was that of a mere ordinary appointee of the court as committee, an indifferent person who was to serve the court as an officer of the court, or whether he had some financial or personal interest in the case and other cases. So I examined the records of the supreme court of

the District of Columbia and I found that from September 8, 1904, to November 25, 1905, Mr. Frederick A. Fenning had been appointed committee in 62 cases by the court; that fully three-fourths of those cases were cases of old soldiers. The old soldiers, in the great majority of those cases—in nearly all, in fact—were pensioners, and I examined to see how it was that he had so many of those cases. I found that in nearly all of those three-fourths of the 62 cases he was appointed the committee of the soldier upon the petition of the superintendent, Dr. W. A. White, who recommended and suggested his appointment. I found that the petition of Superintendent White was drawn on the letter head, and on the legal-cap paper and other paper of the law firm of Coldren & Fenning. I found that the records showed that the law firm of Coldren & Fenning represented the petitioner, W. A. White, in the proceedings. I found in looking over the papers that Mr. Coldren, the law partner of Mr. Fenning, was charging and was allowed a fee for drawing these petitions of ten dollars, fifteen dollars, twenty dollars, and in some cases, thirty dollars. The drawing of that petition was a mere trivial matter. Any attorney could draw that very readily; and for such services it seemed to me that was a pretty good fee. I found that when the petition was sent in to the court it was usually accompanied by the affidavit of two of the practicing physicians, under salary at the asylum. For instance, Dr. Hummer and Dr. Glasscock would certify in their affidavit that a certain party named in this petition was insane.

Upon the petition being heard, one of those physicians, for instance Dr. Hubbard, would appear in court with another physician—not the same one who signed the affidavit, but it seemed to be that it was the turn of one physician on one day and of another physician on another day. Two physicians would appear and testify as to the sanity of the pensioner. For that, in many cases in which settlement has been made of the case by Mr. Fenning, they have received a fee of \$10 or more. It occurred to me that the interest of Mr. Fenning in these cases was not that of a mere indifferent person, and that is the reason why I made that examination. The courts usually appoint a committee for the lunatic or other ward of the Government, and sometimes the court appoints attorneys, but the appointment is not sought after, nor is it sought after as a source of revenue. It seemed to me that Mr. Fenning's attitude in the case was that of a professional committeeman, and in that he was largely aided by Superintendent White, who, in many of these instances, nearly nine-tenths of all these cases, as the record shows, suggested his appointment. It occurred to me that the appointment of a committee in these cases seemed superfluous. The pensions of the old soldiers for whom the committee was appointed are not usually large, as the record shows. In some instances they amount to \$1,200 or \$2,000, but they generally run from \$150 to three or four hundred dollars.

Mr. SMYSER. How would you get a pension without that?

Mr. THOMAS. I do not know that it was necessary to get it. That is my idea of it. If the pensioner recovered he could get his pension, and if he did not recover his heirs could get it, if they could show who they were.

Mr. SMYSER. But how, under the law, where a certain proportion of it goes over to the hospital, could it be done?

Mr. THOMAS. The law has been changed recently, and only a small proportion of it goes.

Mr. SMYSER. But how would they get that?

Mr. THOMAS. I do not know that it would be necessary to get that.

Mr. SMYSER. But how, under the law, if it has to go there, could it be gotten?

Mr. HAY. The law provides that the Secretary of the Interior shall pay it to the superintendent.

Mr. THOMAS. It seems to me that the Secretary of the Interior could make some regulation about that. Take the case of a man like Mr. Logue, who had \$470, and \$80 of back pension. He is a man who had been there for nearly six years, and he did not want his pension.

He said that when he got out he could go and get it. Here was that money, safe in the Pension Department. By these proceedings brought by Mr Fenning, he puts his hand in the Pension Department and takes the money out, and it is transferred to the Interior Department, to that branch represented by the asylum, and in that transfer a very large proportion of that money is somehow distributed to the committeeman, and allowed as doctor's fees, and for various expenses. It might be urged that that money might be invested. Take Mr. Logue's case. Mr. Fenning asked the court that \$300 of that might be invested, and draw interest. Well, now, the first thing the court ordered was that if the investment was made it must be on real estate security, and that the Security Title and Trust Company must guarantee the title, for which the Security Title and Trust Company have a charge of \$10.

Mr. Fenning, in addition to his claim for 10 per cent for collecting the \$400, charged for his services in investing this money, and made a charge for services in paying it out, and if the interest was collected he would still make a charge for his services in collecting the interest. As this interest would be entirely eaten up in that case, all this, to my mind, is an unnecessary proceeding. So when I made that examination I made it more particularly for the purpose of showing Mr. Fenning's interest in the case, and whether or not the hospital aided in all cases toward the release of any pensioner. I had several of them. In this particular case he objected, and the matter was continued over at his suggestion. Superintendent White finally wrote that he had no particular objection to Mr. Logue's release, but we said that he must be released as sane; and the court held that if the superintendent did not sign a certificate of sanity within a certain time, about a week, he would have a trial. When the time came for the trial the superintendent signed the certificate of sanity. I think, as the record shows, he had been there nearly six years, and there never was anything the matter with him, except that when he went there he had been treated for alcoholism. He had been perfectly sane ever since.

That is only one instance that has been called to my attention. It seemed to me there was an unnecessary expenditure of money of the old soldiers who had fought and suffered, and lost their reason, perhaps, in some instances, money which could have been saved for them on their recovery, or for their heirs, without all this. Furthermore, as for the testimony of the doctors, I want to call the committee's attention to the law of April or June, 1904, regarding the tes-

timony of physicians, in an act which provides for the temporary commitment of persons to the asylum for thirty days. It provides that in addition to the affidavits made by the parties making the application for their committal, that the petition shall be accompanied by the certificate of two physicians, and it speaks of the physicians being physicians in regular practice for at least three years. It says—and I am reading from section 5 of the act approved April 27, 1904, to authorize the apprehension and detention of insane persons in the District of Columbia, and providing for their temporary commitment in the Government Hospital for the Insane, and for other purposes—

Nor shall any certificate alleging the insanity of any person be valid which has been issued by a physician who is financially interested in the hospital or asylum in which the alleged insane person is to be confined, or who is professionally or officially connected therewith.

It provides that for a temporary commitment no physician who has any interest whatever in the asylum shall have his affidavit taken. In these cases of the old pensioners, two physicians employed there under salary, and having, if not a financial at least a personal interest in the institution, certified to the sanity of the patient. One of those two and another physician goes to the court and testifies, for which they receive fees. If to commit a person to the asylum their certificate is not allowed, and is not competent, it seemed to me highly improper for the physician's testimony to be taken in cases where it affected the appointment of a committee, and especially where they received compensation—as in these cases they do, and have, and will. Where Mr. Fenning settles up a case and makes a final report, I find that Doctor Hummer or other physicians get their fees. It does not appear that they have gotten a fee in all cases, because the cases are not all settled, but where they are settled, I find that there will be a fee of \$10 for Doctor Hummer, \$10 for Doctor Glasscock, or \$10 for Doctor Logie. That seems to be an unnecessary expense.

Mr. SMYSER. Did you ever call that to the attention of the court?

Mr. THOMAS. I never had an opportunity.

Mr. SMYSER. What precluded it?

Mr. THOMAS. The case in which I had prepared these things was passed out. This Logue case passed out by reason of that certificate of insanity being given. I had intended to present these things to the court for that very reason.

Mr. SMYSER. Do you belong to the Bar Association here?

Mr. THOMAS. No, sir; I do not belong to the Bar Association.

Mr. SMYSER. As a member of the bar, though, have you not felt that it was your duty, if something of that kind was being practiced improperly, to call it to the attention of the court?

Mr. THOMAS. Yes; it might be my duty, I presume, and probably I should have made a stir about it before this. In this case of Mr. Logue, Mr. Fenning's attitude there has not been one such as an ordinary committeeman would show. In the first place, he flung every obstacle and delay he could into an investigation into the man's sanity. He appeared personally in court, and when Mr. Logue was brought into court the court ——— at Mr. Logue as if he wanted to know what was the matter with this man. Well, he struck the court,

I suppose, as a man who appeared to be sane. I explained to the court the situation, and the court was about on the point of hearing the case and sending the man out, letting him loose, as in other cases, on his own appearance and on the testimony of the doctors we had there to testify, but Mr. Fenning opposed it and wanted a continuance. He got a continuance, and then still another continuance. Then, when he was finally discharged, I went to Mr. Fenning's office. The man had not received a dollar from Mr. Fenning, who had some \$470 or \$480 in his hands. I went to Mr. Fenning's office with a notice calling upon him to come into court and render his final account.

I wanted the final account to be made, and to call it up and have it passed upon, so that Mr. Logue could have his money. To that Mr. Fenning demurred, and said that he should have thirty days in which to do that; that they had thirty days to pass upon it. But I said: "The man has no money. In thirty days he will starve to death." That did not seem to appeal to him. Finally I prevailed upon him that we might have the case come up if he did not go to New York that week, but he couldn't say whether he would go to New York or not. After some further talk I saw that he was in no haste to have the case come up. I said: "There are charges in your account which we can properly dispute, but I am not disposed to do that, because the man wants his money, and wants to go away, and he is absolutely without any money." Thereupon he bethought himself that there might be a charge there at the hospital for board, and that he would have to investigate that. So the matter went over, and in the course of several weeks we got it up. When we got it up Mr. Fenning urged in court that this whole matter go over until the meaning of the statutes could be determined regarding the payment of pension money out of the funds to the hospital, and Judge Stafford, who was presiding, said to Mr. Fenning: "This money belongs to this man. He is entitled to it, and I order you to pay down \$200 cash now for him, and then you can determine as to the rest."

As to the rest of that money, six months has gone by and delays have been put in the way. We have brought proceedings to recover the money, and Mr. Fenning has questioned the law, and has come into court with counsel, and the man has not got his money yet, and I do not know that he will ever get it. It seems to me that the man who is appointed a committee should be the committee for the interest of the ward. Mr. Fenning has seemed to have more interest in the hospital; in getting that money into the hands of the hospital, and in paying it out to physicians for examinations, and all that kind of thing, than he did of getting it into the man's pocket.

The same course was pursued in the Corbett case, which I also brought with Mr. Evans. In that case those ladies were taken to the asylum without any warning. Their goods were sold without any warning. Mr. Fenning was the committee of the elder Mrs. Corbett, and was not the committee of the daughter. Their belongings were sold, and according to the testimony in court about \$3,000 worth of their belongings were sold for about \$500. A valuable painting, valued at about \$1,200, was sold for almost nothing. The executors of the husband's estate in Virginia had given a \$75,000 bond, so it will be seen that they were not indigent persons.

Mr. SMYSER. If all that is true, how in the name of God did you get it through your court here?

Mr. THOMAS. Well, that is the state of affairs.

Mr. SMYSER. I am asking you, if that is true, how in the name of God did that get through your court here?

Mr. THOMAS. I am not making any comments on that. But that is the state of affairs. That was the testimony in court.

Mr. SMYSER. What is wrong with you lawyers then, or is it the fault of the court, if that state of affairs is true?

Mr. THOMAS. In that case we were denied a jury trial by the court. The court heretofore had granted jury trials, but the court tried that case itself.

Mr. SMYSER. Had you an appeal, or a writ of error from that denial?

Mr. THOMAS. That is an open question.

Mr. SMYSER. Did you try it?

Mr. THOMAS. I have spent a very great deal of time upon that question, and it is time that has been given purely as an act of charity in that case.

Mr. SMYSER. That is the kind of case in which ordinarily the lawyers are the most assiduous?

Mr. THOMAS. Yes; and the case is not abandoned, and it is not to be abandoned as long as there are any courts, but at the present time it would be useless to bring further proceeding, because the parties are engaged here. Mr. Evans has given all of his time here, and Dr. White is here all the time, and witnesses and others, and it has simply had to be put over; but what has struck me in all these cases is that no person should be committed to an asylum without a jury trial.

Mr. SMYSER. Did you ever ask them to change the law here?

Mr. THOMAS. Yes; I think such suggestion has been made through the press, and has been agitated. I have written regarding it myself.

Mr. SMYSER. But did you ever, through some effective means, come to Congress and ask for a change in the law?

Mr. THOMAS. I think the report of the Medico-Legal Society suggests that very thing.

Mr. SMYSER. Is there any reason why you should have a jury trial?

Mr. THOMAS. Is there any reason why?

Mr. SMYSER. Yes.

Mr. THOMAS. It seems to me to be a fundamental right of citizenship.

Mr. SMYSER. We do not have it in Ohio.

Mr. THOMAS. Well, possibly you do not, but I do not think that gives the famous square deal that a citizen of the United States ought to have.

Mr. SMYSER. I must confess that in thirty-odd years of practice I have never heard a complaint as to the jurisdiction of our probate court to adjudicate persons insane who were brought before it.

Mr. THOMAS. That may have been so in your experience, but I do not think that is the experience of other attorneys in other places. It may work well in Ohio, but I know that gross injustice has been done in the District here for the reason that the parties did not have jury trial, and did not have proper jury trial. They used to have a marshal's jury trial, presided over by the marshal, and not in the presence of the court. That is the way the Corbetts were run out there, and others. After some agitation that was changed, and now they do have proper jury trial, as far as the commitment is concerned.

But take the case of those who are sent from the Soldiers' Home. They are sent there without jury trial.

Mr. SMYSER. Have you ever gone to Congress to have that changed?

Mr. THOMAS. Only in the report of the Medical Legal Society, which calls attention to it. That is one of the things, I suppose, which this committee will investigate and report on.

Mr. SMYSER. You mean, for instance, an inmate of the Dayton, Ohio, Soldiers' Home, if he was sent here?

Mr. THOMAS. Yes.

Mr. SMYSER. But do you not know that he would be adjudged a lunatic in Ohio?

Mr. THOMAS. He is sent here without any trial whatever. I have seen within the last week——

Mr. HAY. Through an order of the chairman of the board.

Mr. SMYSER. No; that is the order of commitment only.

Mr. HAY. That is what I say.

Mr. SMYSER. That is the order of commitment; but he has first to be ascertained to be a lunatic.

Mr. THOMAS. I do not know what the law is, but I know that as a matter of fact they are brought here without any such ascertainment; that they are brought upon the affidavit of the superintendent or officer in charge, who declares that they are insane, but without any jury trial or examination as far as I know. Two men came to my office within the last week, to all appearance as sane as any member of this committee, as far as I can see. They were sent in that very way, and others that I have seen frequently. That is one of the evils. I urged before one of the courts here, in the case of Jesse Owsley, and argued the law that Jesse Owsley was not within what they call the military jurisdiction of the United States, but was a citizen of the United States. He had been sent on, and the committal was made by the superintendent of the asylum, I think, at Danville, or at least in Illinois. The court held that because he went there and placed himself within the jurisdiction of that institution that he was a military subject and subject to the rules of war. I suggested to the court that the rules of war could not be carried out in that institution by civilians, and that there were no officers of the Army there; that they could not carry out the rules of war and the regulations, that it was an impossibility to do anything of the kind, and that he certainly could not be under the rules of war within that asylum there, or that Home. It did not seem to be good law to the court, and Jesse Owsley was remanded.

Mr. SMYSER. Your criticism, I take it, is this: First, you believe that there ought to be a uniform system in respect to the determination of the question of sanity or insanity?

Mr. THOMAS. As far as the Federal jurisdiction is concerned.

Mr. SMYSER. And that, secondly, there ought to be a jury trial accorded any person charged with insanity?

Mr. THOMAS. I think so. I think at least——

Mr. SMYSER. Excuse me for a moment. Of course that being the law, that does not affect the management of the institution so far as getting people there is concerned, does it?

Mr. THOMAS. No; not this particular institution. I think, however, that the superintendent of the asylum might assume the atti-



tude that he was not authorized to hold them under those commitments if he chose to raise that very point.

Mr. SMYSER. Now, as a lawyer, and having in mind the purpose for which this institution was originated, and for which it is being carried on, the law being as it is, do you think it would be wise for the superintendent out there to set himself up and say, "I will not receive these people?"

Mr. THOMAS. If you will pardon me, I think the superintendent stands there to protect the people who are the wards of the Government, and that it would be proper for the superintendent to make a test case in an instance of that kind, as to the question of the propriety of such a committal, and say that he is not empowered under the law itself, as it stands, and under the law as laid down by the supreme court of the District of Columbia, which has held that in all cases outside of those which are purely military every person is entitled to jury trial. That is in the case *In re Bryant*, a case in *3d Mackey*. That law has been affirmed and recognized, and has been recognized by the court here as far as civilians are concerned.

There is the case of Jesse Owsley. He never was within a military jurisdiction. He could not confer a military jurisdiction, or power upon that institution. He could not place himself under that jurisdiction.

Mr. SMYSER. But your suggestions after all come back to the law as it is, largely, do they not?

Mr. THOMAS. Yes, certainly.

Mr. SMYSER. And you think there ought to be a change in that regard?

Mr. THOMAS. Certainly.

Mr. SMYSER. But assuming the law to be as perhaps Doctor White out there has construed it, and as the Departments generally have construed it, then your suggestions would hardly obtain, except as a reason for a change in the statute?

Mr. THOMAS. That is it exactly. A test case, as I said, might be brought.

Mr. HAY. Mr. Thomas, are you familiar with these things? [Handing a paper to witness.] Look at that, please, and see whether that is the form that they use out there?

Mr. THOMAS. Yes. Shall I read that?

Mr. HAY. Yes; please read it.

Mr. THOMAS. It is as follows:

NATIONAL HOME FOR DISABLED VOLUNTEER SOLDIERS,  
*Northwestern Branch, Sept. 19, 1903.*

SUPERINTENDENT GOVERNMENT HOSPITAL FOR THE INSANE,  
*Washington, D. C.*

SIR: Under the authority conferred upon me by the act of Congress approved August 7, 1882, I have to request that \* \* \* George Mickalish, late seaman U. S. Navy, pensioner at \$8.00 per month \* \* \* 17 insane men, members of the Northwestern Branch, N. H. D. V. S., may be admitted to the Government Hospital for the Insane, at Washington, D. C.

Respectfully, yours,

M. T. McMAHON,  
*President Board of Managers National Home for D. V. S.*

A true copy.

H. J. STACK,  
*Assistant Physician.*

That is the form upon which these people are committed.

Mr. HAY. Upon which they are received at the Government Hospital?

Mr. THOMAS. Yes, from my personal knowledge.

Mr. SMYSER. Do you think, Mr. Thomas, that there is collusion between Doctor White and Mr. Fenning?

Mr. THOMAS. I would have no right to express a criticism of that kind, but I think that it is exceedingly fortunate for Mr. Fenning that Doctor White recognizes him in that way. Otherwise he would hardly be appointed to so many cases. Probably one-half of all the committee cases in the records show the name of Frederick A. Fenning.

Mr. SMYSER. I understand that, but in doing that do you think there is anything sinister in it? That is what I want to get at.

Mr. THOMAS. I would not feel that it was proper for me to say anything other than that it is very fortunate for Mr. Fenning that it is done. Certainly it must be done not by mere accident, because these petitions are brought by Coldren & Fenning, as attorneys for the superintendent. It must have been done by the consent or agreement and knowledge of the superintendent, or it would not be brought in that way. He signs these things.

Mr. SMYSER. Can you suggest any reason why Dr. White should be interested in naming the committee?

Mr. THOMAS. I do not think he would have any proper reason to recommend anybody. That is, I do not mean to say that there is anything improper—

Mr. SMYSER. Would he have any improper reason?

Mr. THOMAS. It must be some personal favoritism, to say the least—some personal favoritism—wishing to help brother Fenning, or something of that kind, because the court is amply able to appoint attorneys to do this business, and you scarcely ever see any other attorney that brings these cases.

Mr. HAY. What is the practice here, as regards the appointment of these guardians for insane persons?

Mr. THOMAS. Ordinarily the practice would be the appointment made by some relative or friend who had some close interest. If it required the services of an attorney it would be some attorney who was simply acting as a friend of the court, as attorneys often do in the trial of criminal cases, without seeking the office, or anything of that kind.

Mr. HAY. In those cases is the appointment made by the court of its own man?

Mr. THOMAS. Yes, sir.

Mr. HAY. Without any suggestion?

Mr. THOMAS. Yes; it is not made by suggestion, but in this case it is made by the written suggestion, the written prayer, recommending in eulogistic terms Mr. Fenning. They are all drawn in the same way.

Mr. SMYSER. Is that the common form of petition here in the District?

Mr. THOMAS. I do not think it is. I have never seen any petition brought in which they recommended any particular person, unless it would be some relative—a father, for instance, or some aunt or uncle of some minor, and suggesting that the uncle or aunt was interested.

Mr. SMYSER. What is the ordinary fee, or what would be your fee, for instance, for preparing a petition?

Mr. THOMAS. Of course, I have seen these cases brought in, two, three, four, and five a day. Any lawyer could dictate a half dozen of them in an hour. For that Mr. Coldren receives ten, fifteen, and usually twenty dollars.

Mr. SMYSER. Suppose you had one every other day, what would be your fee?

Mr. THOMAS. Well, lawyers do not like to do business by wholesale.

Mr. SMYSER. No; I have been at the business longer than you have—

Mr. THOMAS. I would be perfectly satisfied to draw them for five dollars, and get the appointment; that is, if they were coming not every day, but one every week. If they came along two and three and four and five a day I should not haggle over the fee.

Mr. SMYSER. In other words, you would take Mr. Fenning's job at five dollars a petition if you were also to be the guardian. Is that what you mean?

Mr. THOMAS. No; I would not want the job.

Mr. SMYSER. Why?

Mr. THOMAS. I would not want to place myself in that attitude, of doing such a wholesale professional committee business. I need the fees and all that, but I would not do it. I would simply pass that by and let the court appoint some other people.

Mr. SMYSER. It has got to be done, though, has it not?

Mr. THOMAS. No; I do not think so. I think the Secretary of the Interior could make some arrangement with the Pension Department to save out for the hospital all that the law allowed, without all that expense and detention of money of these soldiers. It seems to me a shame. This man Logue has been six months there, and he only got \$200 by the vigorous application of his attorneys and the mandate of the court compelling Mr. Fenning to pay it over.

Mr. SMYSER. Take his case, and it simply is awaiting settlement, or a final accounting, is it not?

Mr. THOMAS. The final account was already for settlement before the case was brought.

Mr. SMYSER. What is wrong with your judicial system here, if anything, that you can not hurry that to a conclusion in less than six months?

Mr. THOMAS. It is the intolerable delays of law, of which Shakespeare spoke three hundred years ago. There are so many cases in which counsel are out of town, or otherwise engaged, so many reasons why a case can go over. If you are a lawyer you of course appreciate all that.

Mr. SMYSER. Oh, I have struggled many a time to get a case over, when I was not ready or something of that kind; but I have never seen the time, in a pressing case, where it could not be done in much less time than that.

Mr. THOMAS. My associate, Mr. Evans, with my own aid, spent a good deal of time in preparing a brief in that case, to get that other \$200. When the case came up the District attorney was not ready, and at his request, or Mr. Fenning's request, it was put over another week. When it came up again, as I understand, the matter was submitted on the brief of Mr. Evans and myself, with leave to Mr.

Fenning and his counsel to file another brief. Whether this was done or not I do not know. The court has got it——

Mr. SMYSER. When was that?

Mr. THOMAS. That was three or four weeks ago.

Mr. SMYSER. How long a time did he have in which to file his brief?

Mr. THOMAS. I don't know whether he has filed it or not.

Mr. SMYSER. I say, how much time did he have in which to file it?

Mr. THOMAS. I don't know whether the time was set. I was not in court; a week or two, I suppose. The hot weather is coming on, and the court will probably go to Newport or some place, and along comes fall——

Mr. SMYSER. I think you lawyers are a little to blame.

Mr. THOMAS. I think we are, too, to tell you the truth.

Mr. SMYSER. Well, that is fair.

Mr. THOMAS. I practiced law in Chicago, and they are a little more insistent there than they are in Washington; but here there does not seem to be much disposition on the part of lawyers to insist on haste. The atmosphere and the weather are against it. [Laughter.] I don't know that there is anything else to say, unless you gentlemen wish to ask me some questions.

Mr. BARCHFELD. Was Jesse Owsley a client of yours?

Mr. THOMAS. Mr. Evans had some talk with him, and in connection with Mr. Evans I looked into the matter.

Mr. BARCHFELD. You say you do not think there was anything the matter with him?

Mr. THOMAS. Jesse Owsley?

Mr. BARCHFELD. Yes.

Mr. THOMAS. Oh, unquestionably he was an epileptic; but epilepsy is not insanity.

Mr. BARCHFELD. Do you not know that he is very violent at times?

Mr. THOMAS. I do not know that. I heard that he was kept in handcuffs for two days without their being taken off. That would indicate that he must have been very violent, but I have never seen anything of that kind; but I do not find, from what examination I have made, that epilepsy is a form of insanity. The courts hold that insanity may not be continuous, that it may be only momentary. It may be for a short time, when these fits are coming on, and whilst the sufferer might not be a proper person to take care of himself at one time, yet he might be for a month or two perfectly able to take care of himself.

Mr. SMYSER. But suppose he was that sort of a person; what other place have you in the District to put such a person?

Mr. THOMAS. I do not know that there is any; but I understand that Mr. Owsley has several hundred dollars over there, and I think if he could be sent on to his sister's, that they could readily take care of him.

Mr. SMYSER. But dissociate in your mind, if you can, Mr. Owsley, and take an ordinary case of epilepsy. What place have you in the District to put such people?

Mr. THOMAS. I do not know that there is any. I think there ought to be some place other than the insane asylum.

Mr. SMYSER. That is, for epileptics who are not insane?

Mr. THOMAS. Yes.

Mr. SMYSER. What have you, as a public citizen, done towards getting such a place here in the city?

Mr. THOMAS. I have got more things to do than I can do now—more reforms, I mean. I have been considerable of a reformer in my day, and in fact I think I have done my share.

Mr. SMYSER. You have borne your share of the white man's burden?

Mr. THOMAS. Yes, I have; and the black man's, too.

Mr. HAY. You examine these cases. Does the name of any other physician occur as frequently being called upon to examine these people where they are called before the court?

Mr. THOMAS. There must be a hospital physician. Doctor Hummer, I think, rather leads the list.

Mr. HAY. I mean any others than the hospital physicians.

Mr. THOMAS. Not in the petitions of the superintendent. There are two affidavits from the hospital physician, and one of the hospital physicians is selected out, and another is brought with him—not the one who made the affidavit, but another—and they testify.

Mr. HAY. What I want is whether any other physicians outside of the hospital physicians—

Mr. THOMAS. Not to my knowledge, in the examination of those cases. It was wholly a matter of the hospital physicians, who are under salary and under pay. Their time is paid for, and it seems to me that the pensioner's little pittance ought not to be taken to give \$20 or \$25 at a sitting in that way.

#### TESTIMONY OF ARTHUR THOMPSON.

ARTHUR THOMPSON, having been duly sworn, was examined and testified as follows:

Mr. SMYSER. Mr. Thompson, are you connected with St. Elizabeth's Hospital?

Mr. THOMPSON. Yes, sir; I am employed there.

Mr. SMYSER. In what capacity?

Mr. THOMPSON. I am janitor at the pathological department.

Mr. SMYSER. That is where Dr. Blackburn is?

Mr. THOMPSON. Yes, sir.

Mr. SMYSER. Where you chop up people. Have you got so that you can handle them out there like a grocery keeper does the beef-steak?

Mr. THOMPSON. Well, I am not afraid of them.

Mr. SMYSER. How long have you been there?

Mr. THOMPSON. About two years and seven months, it will be, the 19th of this month.

Mr. SMYSER. What time do you go to work in the morning?

Mr. THOMPSON. About 8 o'clock.

Mr. SMYSER. And when do you quit?

Mr. THOMPSON. I have no particular time. I have worked there at nights until 10 o'clock.

Mr. SMYSER. You are the janitor of that department?

Mr. THOMPSON. Yes.

Mr. SMYSER. And have been such ever since you have been there?

Mr. THOMPSON. Yes, sir; I do my work, and I have to stay there. I have to run errands and such as that.

Mr. SMYSER. What do you know about the treatment of patients over there?

Mr. THOMPSON. Well, I have heard more than I have seen.

Mr. SMYSER. What have you seen, first?

Mr. THOMPSON. Well, I never saw but one case that I thought was rough treatment.

Mr. SMYSER. What case was that?

Mr. THOMPSON. I don't remember. I had not been there two weeks, I don't think.

Mr. SMYSER. Do you remember the patient's name?

Mr. THOMPSON. No, sir.

Mr. SMYSER. Do you remember the attendant's name?

Mr. THOMPSON. No, sir; I can not say that I do.

Mr. SMYSER. Whereabouts did it take place?

Mr. THOMPSON. It took place in West Lodge.

Mr. SMYSER. What was the treatment that you speak of?

Mr. THOMPSON. They had a man there who was very violent, and I thought they might have treated him a little rough.

Mr. SMYSER. How? Describe what they did to him?

Mr. THOMPSON. They had him on the floor, and they were holding him down and choking this patient.

Mr. SMYSER. Choking him how—what with?

Mr. THOMPSON. I believe they had a towel on him. I think they did. I know they were choking him.

Mr. SMYSER. Do you know what that was being done for?

Mr. THOMPSON. Well, I suppose one or the other of them had to get the best of it, either the patient get the best of them or they had to do something with the patient. He was a powerful man.

Mr. SMYSER. Was he a white or a black man?

Mr. THOMPSON. A black man.

Mr. SMYSER. Is he over there yet?

Mr. THOMPSON. I don't think he is. I think the man died.

Mr. SMYSER. You can not tell the name of that attendant?

Mr. THOMPSON. No, sir; I can not.

Mr. SMYSER. Were you present when the skirmish began?

Mr. THOMPSON. No, sir; I was not.

Mr. SMYSER. When you came on the scene the colored man was down and they had a towel around his neck. Is that it?

Mr. THOMPSON. Yes, sir.

Mr. SMYSER. How long did they keep him in that position.

Mr. THOMPSON. Well, I went over there after a man to help me to work—a patient.

Mr. SMYSER. How long did you stay?

Mr. THOMPSON. I did not stay no longer than I could, to get the patient.

Mr. SMYSER. So you did not see the end of it?

Mr. THOMPSON. No, sir.

Mr. SMYSER. Neither the beginning nor the end?

Mr. THOMPSON. No, sir.

Mr. SMYSER. Could you have handled that fellow yourself?

Mr. THOMPSON. No, sir; two of me couldn't.

Mr. SMYSER. Why?

Mr. THOMPSON. Because I don't think they could. The man was a powerful man, he seemed to be. It was as much as three could do to hold him.

Mr. SMYSER. Then there were three of them?

Mr. THOMPSON. Yes, sir; if I remember right.

Mr. SMYSER. Did you see him afterwards? Do you know whether in the toweling he was injured in any way?

Mr. THOMPSON. No, sir; I saw him afterwards often.

Mr. SMYSER. How soon after this did you see him?

Mr. THOMPSON. Well, I couldn't say that. I don't know exactly.

Mr. SMYSER. Have you any other instances to give us?

Mr. THOMPSON. No, sir; I have none whatever.

Mr. SMYSER. Do they ever cut people up before they are dead over there?

Mr. THOMPSON. No, sir; I don't think so. They are always dead.

Mr. SMYSER. What?

Mr. THOMPSON. They are always dead, I think.

Mr. HAY. How are they prepared over there? How do you autopsy them? What kind of an autopsy is performed? Just of the brain, or the whole body?

Mr. THOMPSON. They examine the brain and the body.

Mr. HAY. What kind of funerals do you have over there?

Mr. THOMPSON. I don't know about them. I never was out at a funeral.

Mr. HAY. You do not have anything to do with that?

Mr. THOMPSON. You mean the service?

Mr. HAY. Yes.

Mr. THOMPSON. I never heard the service, but I have been there when they carried them out.

Mr. HAY. Do you know a man there, the superintendent of the laundry?

Mr. THOMPSON. Yes, sir.

Mr. HAY. His name is Maenche.

Mr. THOMPSON. Mr. Maenche; yes, sir.

Mr. HAY. Did you ever see him drunk?

Mr. THOMPSON. Yes, sir; I have. But not on duty there. I never saw him drunk on duty as I know of.

Mr. HAY. How often have you seen him drunk?

Mr. THOMPSON. Twice that I know of. I am sure of twice.

Mr. HAY. Where did you see him?

Mr. THOMPSON. I saw him in the grounds one night coming in. Then I saw him down the river one day—one Sunday.

Mr. HAY. And those are the only two occasions that you saw him?

Mr. THOMPSON. Yes, sir; those are the only two that I remember well—that I can say I have seen him drunk.

Mr. HAY. Do you know anything about playing cards over there?

Mr. THOMPSON. I have heard of them playing cards there.

Mr. HAY. You have heard of it, but do you know anything about it yourself?

Mr. THOMPSON. Well, I have seen them playing cards.

Mr. HAY. Do you know whether they were playing for fun or not?

Mr. THOMPSON. I have seen them playing for beans many a time, and I understood that the beans counted for money, in the smoke-house.

Mr. HAY. Who was playing?

Mr. THOMPSON. I can not say that—patients in the smokehouses.

Mr. HAY. You say you never saw any playing with anybody except among the patients themselves?

Mr. THOMPSON. I do not believe I ever saw a physician playing.

Mr. HAY. Did you ever see any of the other employees playing?

Mr. THOMPSON. I have seen them playing in the smokehouse there.

Mr. HAY. With patients?

Mr. THOMPSON. Playing for fun. I never saw them playing when I thought they was playing for money. I have seen them playing pedro.

Mr. HAY. Have you anything else, now, that you want to say? Do you know anything else about this?

Mr. THOMPSON. Well, I suppose I could think of some things.

Mr. HAY. We do not want you to think of something. We want you to tell of something you know.

Mr. THOMPSON. Well—

Mr. HAY. What is it? Go ahead and tell whatever you want to.

Mr. THOMPSON. Well, the only kick I have got over there is the food that we get in our dining room.

Mr. HAY. What dining room is that?

Mr. THOMPSON. The general dining room.

Mr. HAY. What is wrong with the food?

Mr. THOMPSON. Well, I don't think it is very good food. If we have hash it might be good hash all right, but if you don't like hash you go hungry.

Mr. HAY. What particular complaint have you to make against the food? Just a general complaint about it?

Mr. THOMPSON. Well, if we get steak it is tough and seems to be tasteless. I think we ought to get a little better food than we do. Sometimes it is all right and then again it is not.

Mr. HAY. What is your salary?

Mr. THOMPSON. \$17.50 a month. That is one kick. It ought to be worth more, working in the morgue, but I have never asked for any more. I did ask once, and I got a raise. I went to work there for \$15.

Mr. HAY. You say that you never saw this man drunk except on two occasions?

Mr. THOMPSON. That is all?

Mr. HAY. Did you ever see him drunk on a car?

Mr. THOMPSON. On a cow?

Mr. HAY. On a car; a street car.

Mr. THOMPSON. Yes, sir.

Mr. HAY. You have seen him, then, three times when he was drunk?

Mr. THOMPSON. I came up on the car with him the same night that I saw him drunk in the grounds. I called that one time.

Mr. HAY. Who else was on the car with him?

Mr. THOMPSON. I don't know who was on the car with him.

Mr. HAY. Was anybody from the institution with him?

Mr. THOMPSON. Yes, sir; I was with him for one.

Mr. HAY. Anybody else from the institution?

Mr. THOMPSON. I can't say. I don't believe I can say any names. I have forgotten now. I didn't pay much attention to it.

Mr. HAY. Was Dr. Glasscock in the car?



Mr. THOMPSON. I think Dr. Glasscock or Dr. Hough, one or the other. I can't say which one it was.

Mr. HAY. Was Mr. French along?

Mr. THOMPSON. Yes, I think he was.

Mr. HAY. Well, what was the man's behavior?

Mr. THOMPSON. He was like a drunken person is is all I know—just staggering and talking loud.

Mr. SMYSER. Did the doctors hear him talk loud?

Mr. THOMPSON. I don't know, sir. I should think they would.

Mr. SMYSER. Did they see him stagger?

Mr. THOMPSON. I don't know whether they did or not. I can't say that. They might not have paid no attention to him.

Mr. SMYSER. Was he talking loud enough to attract attention?

Mr. THOMPSON. Yes, sir; it attracted my attention. I couldn't say whether it attracted their attention or not.

Mr. SMYSER. You were on the same car?

Mr. THOMPSON. Yes, sir.

Mr. SMYSER. Did you all get off together?

Mr. THOMPSON. Yes, sir; we all got off at the gate.

Mr. SMYSER. Did you walk in the grounds in a body?

Mr. THOMPSON. I don't remember that, whether we did or not.

Mr. SMYSER. Whereabouts in the grounds, after you got inside, did you see anything further of Maenche?

Mr. THOMPSON. Well, he went over—I don't know whether he went to the laundry or to the center building. I think, though, that he stayed at the center building.

Mr. HAY. Did anybody help him to his room?

Mr. THOMPSON. No, sir; not as I know of.

Mr. HAY. Did anybody go with him?

Mr. THOMPSON. I couldn't say that there was anybody helping him at all or with him, particularly, only coming in together from the car.

#### TESTIMONY OF RICHARD P. EVANS.

RICHARD P. EVANS, having been heretofore sworn, was examined and testified as follows:

Mr. SMYSER. You know the general line of inquiry that has been pursued here, Mr. Evans—

Mr. EVANS. I simply offer myself here to answer any questions that the committee may desire to ask. If they desire to have me state my connection with this matter from the beginning I am prepared to do so, or to answer any special questions that may be asked.

Mr. HAY. Mr. Evans knows the scope of the investigation and what we have been asking. If he has anything to say we would be glad to have it. I do not know that I want to ask any special questions. He has been here during the whole hearing. There is one thing, however: Here is a statement that I have been requested to hand you, Mr. Evans, as to the employees, and so on, at the different insane asylums throughout the country, and to ask you whether or not you prepared it, and from what you prepared it.

Mr. EVANS. Yes; my recollection is that that is a correct extract from the reports of these hospitals named, which Mr. Emmons and I went over together a short time since.

(The above-mentioned statement is marked "Exhibit Evans No. 1," and is as follows:)

1. Illinois Eastern Hospital for the Insane, 1904: 2,167 patients, 9 physicians, 390 attendants, and 261 other employees.
2. Illinois Western Hospital for the Insane, 1904: 766 patients, 3 physicians, 141 attendants. Ratio attendants to patients, 5.70.
3. Oregon State Insane Asylum, 1905: 1,321 patients, 5 physicians, 228 attendants, 56 other employees. Ratio attendants to patients, 5.79; ratio all employees to patients, 4.65. Annual per capita cost of patient, \$119.76.
4. Michigan Asylum for the Insane, 1904: 1,100 patients, 8 physicians, 177 attendants. Ratio attendants to patients, 6.78. Annual per capita cost of patient, \$188.15.
5. Wisconsin State Hospital for the Insane, 1904: 425 patients, 3 physicians, 59 attendants, 70 other employees. Ratio attendants to patients, 7.20; ratio all employees to patients, 3.29. Annual per capita cost of patient, \$200.
6. Illinois Northern Hospital for the Insane, 1904: 1,174 patients, 6 physicians, 154 attendants, 197 other employees. Ratio attendants to patients, 7.62; ratio all employees to patients, 3.34. Annual per capita cost of patient, \$168.
7. South Dakota Hospital for the Insane, 1904: 575 patients, 4 physicians, 120 employees, attendants included. Ratio all employees to patients, 4.79. Annual per capita cost of patient, \$192.

Mr. SMYSER. Is that abstracted from the reports of the various institutions?

Mr. EVANS. From the reports of those institutions; yes. I should, perhaps, make a statement as to how I became involved in this matter for the information of the committee. In July, 1904, I was called upon to look into the case of Alexander N. Willis, an old soldier over there, by Mrs. Goodrich. I could hardly credit the statement she made of this case, and at the time I was getting ready to go to Portland, Me., and so deferred the matter. Later in the year, along about November, she called upon me again, and I then promised that I would look into the matter, because she stated that she had been debarred from entering the grounds because of the interest she had taken in the Willis case. I did not do anything, however, until sometime early in 1905, when I was called upon by Mrs. Wilson to institute habeas corpus proceedings in behalf of her daughter, who was over there—a Mrs. Burroughs. I then visited the institution for the first time since shortly after Doctor Godding's death. I was very well acquainted with him, and also with Doctor Whitmer.

I visited the institution, in company with Mrs. Wilson, to call on Dr. White. I was informed that he was away from the city, and I think we saw Dr. Clark and got permission to visit Mrs. Burroughs. She was then in the L building. I saw Mrs. Burroughs and I immediately got the impression from a two hours' conversation with her that she was not insane. There were one or two statements that she made relative to certain advances made to her by an employee or official of the institution which I could hardly credit, but I left with the impression that she was not insane. On the way out of the grounds—my recollection is that it was early in February; there had been a heavy snow and it was very cold—I saw a lot of old soldiers coming around the L building, some of them in straw hats, some of them with no overcoat, and all seemingly cold and huddled up together. My attention was attracted by the straw hats, and there was also one old fellow who could not keep up. He kept falling behind. He did not seem to be able to keep up with the rest of them. They were going at a dog trot.

Passing along by Atkins Hall, I remarked to a gentleman who was standing there that it was pretty late in the evening—it being then

almost dark—for these old soldiers to be taking a constitutional, but he said: "No; they were not." He said: "The ragged jackets have to take to the woods on visiting day." I said: "What do you mean? I hope that my visit has not had that effect." He said: "No; I mean the board of visitors." Whether that man was a patient or an attendant, or what he was, I do not know. As I say, this was my first visit there for years, but it set me to thinking.

I went back again relative to the Burroughs case in a week or so, but in the meanwhile I had made some investigation into certain court proceedings in which she and her mother, or her professed mother, had been involved, and because of the fact that they would not let me into their confidence entirely as to their past lives, where they came from, etc., I decided that I would not take any interest in their case and I dropped it.

On the second visit I made there I met a man named John Mehan, an old boyhood friend of mine. I was surprised to find him there as a patient. I asked him what he was doing there, and he said he was having a pretty good time. He said it was—as he called me "Dick"—he said: "Dick, it is a very good place for a fellow who is not crazy and knows how to take care of himself, but," he says, "it is a hell of a place for crazy people." I said: "What do you mean by that?" He said: "You may find out some day, but I am not talking out of school any more than that."

Subsequent to that Mr. Behan called at my office several times. He was employed there as a bricklayer or something of that sort, and getting good wages in the hospital. He called two or three times and borrowed money from me, and explained that he was still engaged in his old habit of playing cards and losing his income.

After some correspondence relative to the Willis case, in the endeavor to get some facts that would corroborate in some way the statements made by Mrs. Goodrich, I called at the hospital to see Mr. Willis. I was permitted to see him in the presence of Dr. Hummer and an attendant. I got a pretty complete statement from him, which seemed to surprise Dr. Hummer somewhat; at least, he expressed surprise. He said he knew more about the case than he had known before. I then went away and engaged in correspondence with his son, through whose influence he had been put there, and by a series of letters of my own and others I managed to corroborate everything in the statement made by Mr. Willis, which was to the effect that he had deeded all his property to his son without consideration; that he had been an employee of Arnold, Constable & Co., and was pensioned off at the rate of \$50 per month; that he had been rendered unconscious in the city of New York, and while unconscious had been taken to the Milwaukee Home and that from the Milwaukee Home he had been sent to St. Elizabeth's as an insane person. This is the statement that Mrs. Goodrich had made first to me, nearly a year before, and which I had considered nearly incredible.

Nearly all of this information I got by a course of systematic letter writing, from the admissions of the son himself. I also got the son to agree that his father might come out of the institution provided he would sign an agreement that he would go to some other institution and remain there for life, and never visit Philadelphia, where he lived. I showed that to Dr. Hummer, and Dr. Hummer said that he would never consent to Mr. Willis signing any

such agreement. I modified it somewhat, but that did not satisfy Mr. Willis's son, in Philadelphia; but finally he wrote to me, and I have his letters here, that if I would have him committed to some other institution, or taken care of by someone, and guarantee that he would not come to Philadelphia to see him; that he would authorize me to proceed; and he sent me an order to that effect, authorizing me to act for his father and for him in behalf of his father, and also notified the institution. When I went over there to see Mr. Willis and the officials there I found that they had received that order or notification from Mr. Willis's son in some shape. I never saw the notification that he had sent to the hospital, but they declined to release him under any conditions unless someone would become security for him; in other words, become the guardian of his person.

Upon that, and the information I had received—which included the very peculiar fact that this pension of \$600 per annum from Arnold, Constable & Co. had been commuted by this son immediately after this old man's incarceration in St. Elizabeth's for the sum of \$200 cash—I corresponded with Arnold, Constable & Co., and I have their letters stating the fact that the pension had been commuted for \$200 cash. I tried to get them to reinstate him on the pension list, but it appears that the old members of the firm who knew old man Willis had died, and there were younger members in the firm who hardly knew him, and who had no interest in him. They declined to reinstate him. So you will see that at the time the old gentleman was installed at St. Elizabeth's he was in receipt of a pension of \$50 a month from Arnold, Constable & Co. and \$12 a month from the United States pension agency, making \$62 per month. Immediately upon entering the institution he was deprived of all that, the \$12 a month under the law as it then stood going to the hospital. That has been changed by the act of February 20.

The refusal of the hospital authorities under the circumstances to let Mr. Willis go and discharge him necessitated the bringing of habeas corpus proceedings, which I did, and Mr. Willis was released upon an order of the court upon the failure of the hospital authorities to institute proceedings in lunacy. The court ordered that if they failed to do it by a certain date he should be discharged as illegally committed, under that form of commitment from national homes which has been filed here.

MR. HAY. You say he was committed there from a home. Do you mean a soldier's home?

MR. EVANS. The National Soldiers' Home at Milwaukee, Wis. Those are about all of the facts in the Willis case, and it constitutes the ground of my first appearance in these matters. The Willis habeas corpus proceedings were filed early in July, 1905, and that caused some attention to be called to the matter. I had two or three old soldiers walk into my office who were on parole, and who desired also to be released. I prepared several habeas corpus proceedings, and I think in one or two instances they were discharged by the hospital authorities without the filing of petitions. In several cases I had to file the petition for writs of habeas corpus, and in several cases the soldiers were discharged.

One of them was the James Shaffer case. Another was the case of a man named Kulcke, and there were some others which I forget. But altogether I had applications, and I have them in my office

now, in some thirty, forty, or perhaps fifty of these cases, and I visited quite a number of them after they received their release, and was convinced, in my own mind, that there are quite a number of old soldiers who are confined there, sent there from National Homes, who were drawing pensions, and who are not dangerous to themselves or anybody else, who could take the ordinary care of their persons that people at their stage of life do, but who may have some of the little peculiarities of advanced age, and for whom, in my judgment, a National Home is the proper place, where they would get not only the support provided by the Government, as good as they can get at St. Elizabeth's, including medical attention and all that, and where they would also be entitled to enjoy the use of their pension money.

Mr. HAY. There is one thing I would like to ask you. I inquired of Dr. White about it, and I have not got it clear in my mind. In the case of a man drawing a pension before the act of February 20, 1905, do I understand that all of it goes into the hospital?

Mr. EVANS. Every dollar, whether it was \$6 a month or \$100 a month, every dollar went into the fund of the hospital for general purposes, and not for the specific benefit of this man; and all the money is retained there. There is a big fund now in the Treasury of the United States, where the parties have died.

Mr. HAY. And it is used there?

Mr. EVANS. It is used there for general purposes. They could use it on the streets, on the roads, and for painting fences, etc.

Mr. HAY. You say it is retained in the Treasury?

Mr. EVANS. Quite an amount that had not been expended is put to the credit of the hospital in the Treasury account. I have seen some statements here about that. Since the passage of the act of February 20, 1905, the pension money is cut up. It is cut up on the basis of about a sixth. For instance, take a pension of \$8 a month, stating the figures approximately: About \$1.34 of that is set aside for any little needs or wants of the soldier. About \$3.33 is set aside for a fund to be turned over to him in case of his discharge, and \$3.33 a month is retained for his care and maintenance in the hospital. In the event that he has dependent relatives and others from the outside, there is some provision made, I believe, that a part shall go to them, in the small pensions.

As the amounts grow larger it is divided up, in about the same way; but it does provide what has not been the case heretofore, as in the Willis case and other cases where the old soldiers have been discharged as cured. Their pension money lies in the asylum, in this fund, and they have been discharged, frequently without one dollar in their pockets. Under the new law there is a little fund, and I think the new law is very fair, although I do not see any reason why, as long as Congress makes an appropriation every year to support and maintain the soldiers at the same rate that they support and maintain indigents, I do not see why anything should be deducted from the pensions of these unfortunates. If they have not any relatives I think it should be kept as a fund, to be turned over to them in case they are discharged as cured.

In respect to the Logue case, that is what he was figuring on. He was such a crazy man that he concealed the fact that he was a pensioner at the rate of \$8 a month, for the purpose of having a fund

there which he could draw when he was discharged, knowing that if they knew he had a pension it would go into the fund of the hospital. According to his testimony and his statement to me, in a conversation with Dr. Hummer about going out, Dr. Hummer remarked: "You haven't got any money." He said, "I have got some money in the United States Treasury." Dr. Hummer found out that he was a pensioner, and in about six months he received information from Mr. Bastin that Mr. Fenning had been appointed his committee, and had his money out at 4 per cent. That is the first he knew about it. He never was consulted in any way. All of this trouble in the Logue-Fenning matter has grown out of that.

I will say, in explanation of the action of the court, that the brief that I submitted strikes at the very foundation of Mr. Fenning's authority in this and probably in a good many other cases, upon the ground of no notice having been served upon this alleged insane person in these proceedings to appoint a guardian, and that he never has had a day in court, either personally or by guardian ad litem, and that the entire proceeding is void, and I think the authorities that I have furnished substantiate that point. That is what the court is holding up now for consideration. I have telephoned there several times, and have received the information that the court has not as yet reached the case for consideration.

I will state further, in the Logue case, that after his discharge there was no money turned over to him by his committee. I communicated with the hospital and tried to get his pension certificate, which was held there. He was discharged just before pension day. The superintendent refused to surrender the pension certificate. I went to the Interior Department and presented the case there, and by telephone the superintendent was instructed to deliver the pension certificate to Mr. Logue, so that he could draw his quarter's pension, then due, which kept it from going into the hands of the committee.

I want to state further that on the occasion of one of my visits to see Mr. Willis I had to go down in the field to find Doctor Hummer down at the baseball grounds, where he was playing ball, and I secured his consent to see Mr. Willis. He sent an attendant with me up there. The attendant went in for Mr. Willis—and this is something that I saw with my own eyes and can testify to as an absolute fact.

An elderly patient, a little old man, after this attendant went in, opened the door and came running out, and started down the steps just like a little child would scamper along; and some one dressed in uniform came out and called out to him "You damned old fool, come back here," came to the steps, grabbed him by the collar and yanked him around and shoved him back and pulled him in through the doors. I do not know that there was any particular amount of force required in that case, but it did not seem to me it was proper conduct on the part of an attendant toward an old soldier. That, in connection with the large number of instances that were recited to me by a man named Robert T. Ward, a patient there awaiting discharge, and who was subsequently released, and by John Meehan, the person I have referred to, and others, indicated to me that perhaps things were not as pleasant there for the patients, and especially for the old soldiers, as they might be.

I met with considerable discourtesy there, especially at the hands of Doctor Hummer, and there was always an interference and always

a desire to prevent consultation with any of these soldiers, either by myself or with physicians whom I took over there. I want to say right here that Doctor Emmons, one of those physicians, who saw more of these people, probably, than the hospital authorities know of, advised me in quite a number of cases that in his opinion they were proper cases for a hospital; and it was in very few of these cases indeed that he advised me to the contrary. I was careful before proceeding in any of these cases to see the patients a number of times, and when I found that the hospital authorities would not allow me to see my client who had written to me or whose friends had desired my interposition in their behalf, without the presence of attendants, why, in a number of instances I managed to see them without going to the heads of the departments and asking. On the occasion of one of my visits I had leave from Doctor White to see two of the patients without the presence of the attendant or others—a man by the name of Owens and another by the name of Bailey.

Doctor Hummer insisted upon being in the room with an attendant present. They wanted to see me, not relative to getting out, but relative to some other matters. I took their statements down and used a little of the hospital paper, a couple of sheets. I think I have got them here—taken off of a little pad that was lying there. I think there were four or five sheets of ordinary paper, about that size [indicating]. After I was through with the interview Doctor Hummer threatened to have me arrested for stealing hospital property and compelled me to leave my notes on the table. If it had not been for the fact that my wife was not in such a condition at that time that I cared to have her annoyed in any way, I should have seen his bluff; but as it was I made a further memorandum of those notes on the back of some letters that I happened to have in my pocket. I left them there with an indorsement of the facts. A day or so afterwards Doctor White returned those notes to me with this letter:

GOVERNMENT HOSPITAL FOR THE INSANE,  
Washington, D. C., November 20, 1905.

MR. RICHARD P. EVANS,  
*Stewart Building, Sixth and D sts., NW., Washington, D. C.*

DEAR SIR: I very much regret the occurrence of Saturday afternoon as it was brought to my attention in the evening. Dr. Hummer's action in the matter was quite uncalled for. I return you herewith inclosed your notes.

Very truly, yours,

WM. A. WHITE, *Superintendent.*

I have the notes here, with the indorsements.

In all cases before bringing proceedings I have communicated with the hospital authorities, and have endeavored, as far as possible, to get the release of such people as I thought should be released, without any court proceedings or any expense to them. For instance, here is a letter dated November 23, 1905, relative to three cases, as to which I had made frequent inquiries, and also made personal visits.

MR. HAY. Who is this from?

MR. EVANS. This is from Dr. White. It is as follows:

GOVERNMENT HOSPITAL FOR THE INSANE,  
Washington, D. C., November 23, 1905.

MR. RICHARD P. EVANS,  
*1403 New York Avenue, Washington, D. C.*

DEAR SIR: On the occasion of your recent visit to the hospital you asked me regarding the condition of three patients.

One, J. A. Connell, you will recall I had some conversation with you about last summer. This man's history I believe you know quite well. Mr. Connell is still suffering from certain residual false ideas, the result of the acute mental disturbance from which he was suffering at the time of his admission to the hospital. I do not believe that he would get along outside and am afraid a trial would only result in his going back to liquor and probably having a repetition of the trouble he has had heretofore. This would quite possibly terminate most unfavorably as these patients do not stand repeated attacks of the sort from which he has suffered.

George Nicholish is an old man, suffering from the dementia of old age. He is childish, but in the main harmless and good-natured; he has parole of the grounds and gets along pretty comfortably, though he does a good deal of complaining. He has, so far as we know, no friends or relatives, and in his enfeebled condition of mind and body could hardly be expected to get along outside of the protection of the institution, unless some one took sufficient interest in him to look out for him.

Charles Samuelson, at the time of his admission to the hospital in 1901, was suffering from marked mental depression and had the history of having made several attempts at suicide. At present symptoms of mental disturbance are in abeyance, but he has developed consumption. He says he is forty-seven years of age and, so far as we know, has not a friend or relative in this country, nor any means, and in his rather poor physical condition it would hardly be proper to discharge him from the hospital unless we could be reasonably sure there was going to be some provision for his care.

Very truly, yours,

WM. A. WHITE, *Superintendent.*

This man J. A. Connell you had before you as a witness to-day, and I think the committee is absolutely qualified to judge as to the condition of that man, as to whether he is a proper man to be confined in the asylum. I will say that he went there nearly three years ago as a very bad drunk. There is no question of that. For some months he was under treatment for that drunk, and since then he has been on parole, right along, for nearly two and a half years; and for the past year I have been endeavoring, in a pleasant way and without legal proceedings, to have Mr. Connell released by the physicians in charge.

With respect to the statement made here—I do not know what the residual false ideas means, or what they are—I have not been able to find any in about 50 conversations, probably, with Mr. Connell, and I do not think that the position taken by the hospital authorities is correct. I have used the argument that if Mr. Connell had been committed for two years in the penitentiary for grand larceny, it would be just about as reasonable for the warden of the penitentiary to continue to hold him there indefinitely and for the rest of his life, for fear that he might commit larceny again if he got out.

MR. HAY. What purpose could the authorities there have in holding him if the man was sane? What could be their reason? I can not see any possible reason.

MR. EVANS. I can not see any reason either, except that it helps to fill up those buildings and makes a large town of it, and keeps the appropriations up.

MR. HAY. Yes, but the one man would not have that effect.

MR. EVANS. No, but he is simply one of those mentioned here in this letter. That is true of all of these gentlemen mentioned here in this letter. These men, for instance, are men whom I say are proper subjects to be cared for in soldiers' homes, and given the benefit of their pensions there, and that they should not be imprisoned for life in a lunatic asylum.

MR. HAY. You mean in Government Soldiers' Home?



Mr. EVANS. Yes, sir; and there are others there who are in much better condition than they are. Charles Samuelson, and George Nickolish are men who have been in my office and have talked with me. These people have talked with me, some of them recently, some of them for a month, and some of them for a year or two past.

Mr. BARCHFELD. Are these two soldiers pensioners?

Mr. EVANS. They are pensioners.

The CHAIRMAN. Can you really think of any reason why the hospital should want to retain people that they believe are perfectly able to take care of themselves?

Mr. EVANS. Only the reason I have stated in answer to a somewhat similar question a few minutes ago.

Mr. SMYSER. Is that reason satisfactory to yourself?

Mr. EVANS. It would not be satisfactory to me if I was the head of that institution.

Mr. SMYSER. But I mean is it satisfactory to you, as a man and a citizen, and a lawyer?

Mr. EVANS. Well, the observation and the experience I have had over there would rather tend to impress the truthfulness of that idea upon my mind, because of the fact that there is, in every case that was brought to the attention of the superintendent over there a disposition to use the very strongest effort possible in defeating the release of the patient.

Mr. HAY. How many of the cases that you have brought before the court on habeas corpus proceedings have been discharged by the court as being sane?

Mr. EVANS. I do not think there is more than one case that actually went to the jury. That is the case of Kulcke. He was declared sane by a jury. In other cases the court ordered the discharge of the petitioners unless proceedings in lunacy should be commenced by the hospital authorities to determine the condition of their minds.

Mr. HAY. How many cases have you had out there that have been brought before the court?

Mr. EVANS. I do not think I have had altogether more than perhaps half a dozen. One of those cases was the Connell case. In that case Justice Stafford took the position that they were not entitled to a jury trial, and heard the case himself, and sent the man back to the institution. In that case I noted an appeal to the Court of Appeals, and had a transcript of the record prepared; but in the meanwhile, or previous thereto, the District Attorney had taken appeals in the case of Willis and Shaffer, and had perfected his appeal and had the transcript filed and printed, and the case set for trial in the January term. As those cases involved precisely the same point as the Connell case, I did not feel justified in going to further expense of prosecuting that appeal, which would have been some forty or fifty dollars, and so I let the time pass for filing the transcript, and when the January term rolled around the District Attorney dismissed the other two cases, leaving me out in the cold.

Mr. SMYSER. You were up in the air by reason of having failed to file your transcript?

Mr. EVANS. Yes; that is right. I did not suppose that it was necessary to have more than two test cases, which were already before the court.

The CHAIRMAN. Do you, as a lawyer, think that as much opportunity should be granted to a lawyer to see a client, a person who is confined in an institution, as should be granted with one who is not confined there?

Mr. EVANS. I think that where people are committed to the institution without due process of law—that is, without having been formally adjudged insane—that there should not be that kind of opposition exercised which might be proper in other cases. Where a person is, on the face of it, a maniac, an absolute lunatic, and has delusions or hallucinations that are apparent, and not residual false ideas, I think it might be very proper for the authorities to be very careful.

Mr. SMYSER. In such a case you would not want to consult with him, or want to have a talk with him, would you?

Mr. EVANS. I would not object to talking to such an individual, and giving him all the comfort and encouragement that I could.

The CHAIRMAN. You spoke of the man who had been on the stand to-day—Mr. Connell?

Mr. EVANS. Yes.

The CHAIRMAN. You say you have seen him 40 or 50 times?

Mr. EVANS. I think so.

The CHAIRMAN. Where have you seen him, usually?

Mr. EVANS. I think I have seen him every time I visited the institution, and I suppose he has been at my office probably—well, he has been at my office certainly a score of times, and perhaps more.

The CHAIRMAN. Does he come to your office in the charge of an attendant?

Mr. EVANS. No, indeed.

The CHAIRMAN. He is on parole?

Mr. EVANS. He has parole, and can go anywhere. He was at Chesapeake Beach yesterday.

The CHAIRMAN. Did you know this man Marshall, who testified here?

Mr. EVANS. Yes.

The CHAIRMAN. Where did you first meet him?

Mr. EVANS. I met Mr. Marshall over at St. Elizabeth's there, some time in the spring of 1905.

The CHAIRMAN. Did you go for the purpose of seeing him?

Mr. EVANS. I went purposely to see Mr. Marshall. I got permission at the administration building to see him, and I went there and had a talk with him.

The CHAIRMAN. Do you think he is a man who is perfectly sane?

Mr. EVANS. I think that Mr. Marshall is extremely erratic in some particulars. I did not undertake to get Mr. Marshall out on a writ of habeas corpus. I advised Mr. Marshall on several occasions to accept the proffer made to him by the institution to release him upon the condition that he would go to his relatives in Boston, I believe, and finally he agreed to that and went there in charge of some agent of the board of charities, I believe. I did not care to take proceedings in his case.

The CHAIRMAN. You communicated with him, did you not, relative to testifying before this committee?

Mr. EVANS. I did not intend to subpoena Mr. Marshall, but two or three friends of his insisted upon it, that he had information that would be valuable to the committee, and knowing, as I did, the fact that he seemed to be almost an official over there on the ward where he was, I was finally overpersuaded, and I put his name on the list to be summoned. If I had consulted my own ideas, I would not have done it.

The CHAIRMAN. You know about this circular, do you not, that Mr. Marshall issued?

Mr. EVANS. Yes; that circular was brought to me the evening he was distributing it. The information came to me that he was holding a meeting at the corner of Seventh street and the Avenue and was distributing circulars that were not commendatory of this committee, and I asked the party to endeavor to get one, and he did furnish one to me that evening.

The CHAIRMAN. You knew a good deal about Mr. Marshall's record, did you not, before meeting him?

Mr. EVANS. No; he had made some statement to me as an attorney relative to some complaints that he had to make against the Post-Office Department, for having ruined his business in two or three instances, in the manufacturing of neckties.

The CHAIRMAN. But you understood that he had been in more or less trouble, did you not?

Mr. EVANS. No, sir; no further than that, that he had been in trouble with the post-office.

The CHAIRMAN. You knew that he had been arrested here in the city of Washington for traipsing around in convict garb, did you not?

Mr. EVANS. He told me that himself, when I saw him at the institution.

The CHAIRMAN. Did you think that that was an evidence of sanity, or of insanity?

Mr. EVANS. Well——

The CHAIRMAN. Answer that question, will you? You are a lawyer. Answer that question as you would like me to answer you, if you were asking the question and I were answering.

Mr. EVANS. As I said, I thought that it showed he was very erratic. I do not know that it could be an evidence of insanity. Any fool might do that, who was not insane. You see, from my reading of the question, Mr. Olcott, it does appear that the law takes this position, and the authorities, I think, will substantiate it, and that is that every person has some little hobby, or is a little off, such as you might say the spiritualists, or the Christian Science persons. Every such person is not insane, and is not necessarily to be committed to a lunatic asylum for life. If they are not dangerous to themselves or to others, and if they can get along in the community, it is no more right to put them there than it would be to make them——

The CHAIRMAN. But you do not think it a very agreeable thing to have a man traveling around the Treasury building dressed in convict garb, and trying to get a crowd together for the purpose of denouncing people in high places, do you?

Mr. EVANS. I think he should be arrested for it and should be given ninety days or six months in jail.

The CHAIRMAN. I will ask you whether you wrote a letter to him on the 10th of May, which is published in this circular?

Mr. EVANS. I am not certain that that is the correct copy. It is very close to it. I thought I put something else in it.

The CHAIRMAN. Do you think, as a lawyer, that that was a proper letter to write to a man whose history you knew as well as you knew Mr. Marshall's?

Mr. EVANS. I knew Mr. Marshall as being——

The CHAIRMAN. No; I want to ask you that question. Do you, as a lawyer, think that the letter you wrote, dated Washington, D. C., May 10, 1906, and which is printed upon this circular, was a proper letter for you, as a lawyer, to write to a man whose history you knew as well as you knew Mr. Marshall's?

Mr. EVANS. I think, knowing his history——

The CHAIRMAN. Can you not say yes or no to that?

Mr. HAY. Oh, let him answer in his own way.

The CHAIRMAN. I want an answer.

Mr. EVANS. No, I will not answer yes or no.

The CHAIRMAN. No, I want an answer to that question.

Mr. EVANS. I will say that in probably ninety-nine cases out of a hundred it would not be a letter that I would write, but knowing the man as I did, and knowing the facts, I think it was a proper letter to write to Mr. Marshall. In other words, I did not want him to come here with a great big red button on him, reading "Jesus is coming," and I did not want him to come here and treat the committee to religious services.

Mr. SMYSER. What would be wrong in treating the committee to that sort of services?

Mr. EVANS. I should not think they would require it.

Mr. BARCHFELD. You spoke of Mrs. Burroughs. You thought, Mr. Evans, that nothing was the matter with her. Is that right?

Mr. EVANS. I did not think that she was insane, but I did not think that it was a case, under the circumstances, that it was proper for me to interfere with.

Mr. BARCHFELD. You thought it was not proper to interfere?

Mr. EVANS. I did not care to take hold of it, because they would not admit me to their confidence. There seemed to be a good deal of mystery attached to those people, and I did not care to take hold of the case unless I felt certain about them.

Mr. BARCHFELD. Her history is that she is a chronic paranoic, that she is now in a hospital in New York, and that she escaped from St. Elizabeth's, and she has a police record in this city.

Mr. EVANS. It was the police record that deterred me from taking any steps in the case. I met her on the streets of Washington I suppose a dozen times after the so-called escape, and if I could place any credence in the statement she made as to how she escaped, and who got her to escape, and who was taking care of her, it would make a very interesting story.

Mr. BARCHFELD. How long have you been practicing law in this city?

Mr. EVANS. Thirty-odd years.

Mr. BARCHFELD. Are you a member of the District Bar Association?

Mr. EVANS. I am not a member of the Bar Association, and a good many of the attorneys here are not.

The CHAIRMAN. Were you ever invited to attend a meeting of the Board of Visitors?

Mr. EVANS. I received a communication signed by the secretary—the superintendent, William A. White, to attend and give testimony, I believe, relevant to a certain publication that appeared in the press.

The CHAIRMAN. Did you attend?

Mr. EVANS. I did not attend.

The CHAIRMAN. Why did you not go there?

Mr. EVANS. I think—I am not certain whether that letter is in the record or not—the main reason why I did not go was at that time there was a resolution pending which had been referred to the Committee on Rules, for the Congressional investigation, and I did not think it was a proper thing to anticipate the action of Congress in the matter; and furthermore, as I specified in my letter, or suggested, at least, to the committee, that they might consider the proposition as to whether it would not place them in the very delicate position of investigating themselves.

The CHAIRMAN. Did you answer this communication?

Mr. EVANS. I did.

The CHAIRMAN. Have you a copy of that answer with you?

Mr. EVANS. I have not a copy with me. It is in the Congressional Record. It was embodied in the speech of the Hon. Frank Clark, on the floor of the House.

The CHAIRMAN. Is the letter that you received from the superintendent there also?

Mr. EVANS. I think so. If you desire, I can file an original and copy—

The CHAIRMAN. If the copy is in the Record, we can find it easy enough.

Mr. SMYSER. Mr. Evans, in your letter to Mr. Marshall did you italicize several words in your letter?

Mr. EVANS. I do not recollect doing so. My recollection is that there were several words there also that were complimentary to the committee, which do not appear in this print.

Mr. SMYSER. But about this print, you had nothing to do with the printing of this letter?

Mr. EVANS. Nothing whatever. Information came to me that he thought of getting up a thing of that kind, and I sent word to Mrs. Goodrich, who I thought would have more influence with him than anybody else, not to do anything of the kind and to get out of the city.

Mr. SMYSER. I see there are several words here in the printed copy which are italicized. For instance, the sentence “and will rely upon your keeping out all personal grievances” has the word “personal” italicized. Then in the sentence “they are hard-headed men of the world and want facts from personal knowledge of actual occurrences at St. Elizabeth’s” the words “facts” and “personal knowledge” are italicized. In the next sentence, “religious enthusiasm or display,” the word “religious” is italicized. Was there anything in your letter to suggest, even, to the printer to put these words in italics?

Mr. EVANS. It may be possible that I underscored those, but I have no recollection of doing so.

Mr. SMYSER. "We are told to be 'wise as serpents' and must govern ourselves accordingly." You wrote that?

Mr. EVANS. I wrote that.

Mr. SMYSER. What did you mean by that?

Mr. EVANS. Well, perhaps you gentlemen may remember a scriptural passage, "harmless as doves and wise as serpents," and knowing his religious frame of mind, and having made those suggestions about keeping out personal matters and not being religious, I thought that was a suggestion that might strike him favorably.

Mr. SMYSER. When you reached the conclusion of your letter and penned that sentence, did you have in mind the thought that perhaps this man Marshall was a lunatic, but that he might so demean himself here as to pass for a sane man?

Mr. EVANS. I had in mind, and I told him precisely what did occur in this committee, and that was that if he came before the committee and evidenced and exhibited undue religious enthusiasm and tried to recount personal grievances the committee would cut him off and not hear the facts that might be in his possession.

The CHAIRMAN. The committee has not shown a disposition to cut anybody off, has it?

Mr. EVANS. They cut off Mr. Marshall, as I said they would, and very likely he entertains the idea now that I suggested that he be cut off. I do not know that, but I believe so.

Mr. SMYSER. With all due respect, I do not think you quite answered my question. When you had penned your letter and came to the concluding sentence, "we are told to be 'wise as serpents' and must govern ourselves accordingly," in penning that concluding sentence did you have in mind the fact that Marshall perhaps was a lunatic, but by reason of the caution you were giving him he might come before this committee and pass for a sane person?

Mr. EVANS. No, sir; and I do not consider Mr. Marshall a lunatic at all. I believe his testimony would be just as competent in court as that of a great many other persons who have testified before the committee and who are not classed as being insane. If Mr. Marshall should witness a murder in the streets of Philadelphia, his testimony would be absolutely competent in the courts of Philadelphia as a witness to that murder.

Mr. SMYSER. When I studied for the ministry—

Mr. EVANS. What!

Mr. SMYSER. I say when I studied for the ministry I always understood that biblical expression "wise as serpents" in a certain sense. Why did you use that expression in this letter? What purpose had you in mind?

Mr. EVANS. The purpose I had in mind can only be found by taking it in connection with what preceded it, and that was to suggest to Mr. Marshall that it would be wise to keep out his personal grievances and to keep out any undue religious fervor or enthusiasm in giving his testimony.

Mr. SMYSER. Did you also have in mind that if he indulged in that that there might be unfavorable impressions formed as to him?

Mr. EVANS. I think I have already stated that it was in my mind that if he did that the committee would probably cut him off before he had made his full statement, and told him so.

Mr. SMYSER. Do you know where he is?

Mr. EVANS. I do not. The last I heard from him was through Mrs. Goodrich; that he was in the city of Philadelphia, and I think she notified the sergeant-at-arms here of that fact. I take the position, gentlemen, that the committee could gather a great deal of very valuable information on these points from the people who could give it, and that would be a number of patients over in the institution there who are not violently insane in any way. They could place their own weight upon the testimony as to its credibility, but it does seem to me that it would be entitled to almost as much weight, if not quite as much weight as that of a good many employees who come here and testify under very peculiar conditions—under the heavy hand of their boss.

Mr. BARCHFELD. Or discharged employees with a grievance. That is the same thing.

Mr. EVANS. I do not quite catch that in connection with what preceded it.

Mr. BARCHFELD. You are questioning the character of the witnesses that come here. You say that some that come here are employees who fear the mailed hand of the boss; and I in the same breath assumed the license to question the character of the testimony given by ex-employees with a grievance.

Mr. EVANS. Oh, I understand now. Yours was simply an addition to what I had stated, and not a question.

Mr. BARCHFELD. Yes.

Mr. HAY. Mr. Evans, in beginning this movement toward the investigation of this hospital, by what were you actuated? Had you any grievance against the authorities of the hospital?

Mr. EVANS. I had not, and I had no idea that I was beginning an investigation of the hospital.

Mr. HAY. In the course of the investigation, in furnishing the committee with the names of witnesses, what did you intend to do?

Mr. EVANS. To better the conditions over there, for the patients first, and for the employees second. I have no feeling against Dr. William A. White, not in the slightest degree. I have nothing but the kindest feelings, I may say, for every member of the staff, including Doctor Hummer, who certainly has not done anything with respect to myself that should entitle him to very much consideration. My visits over there led me to feel that a great deal should be done for the comfort and for the improvement and treatment of the old soldiers in what is called the "bull pen;" and with due deference to the various laudatory remarks about that triangular inclosure there—which has about a 12-foot stone wall all along one side, and is nearly inclosed with brick buildings on the other side of an acute angle, and where there is a tall picket fence, about ten or twelve feet high, with barbed wire on its top—my impression is that if one of these physicians who think it such a beautiful and lovely place were to have to spend one, two, three, or up to eight or ten years in there, as some of these old fellows do, he would want to push out the walls a little bit and enlarge it, so that he could see some new blades of grass, and get under a larger tree.

Mr. HAY. It has been suggested, Mr. Evans, either in the public prints or by somebody—I do not know exactly who—that you may have been actuated by the fact that the practice has arisen here of appointing a single person at the bar to act as guardian for these old

soldiers and that that has had something to do with your beginning this investigation. Is there anything in that?

Mr. EVANS. There is nothing in that whatsoever. I will say right here that two or three years ago Mr. Frederick A. Fenning came to my office and suggested a somewhat similar arrangement to me, by which I should act as attorney and get fees and he would act as committee and I declined to enter into it. He visited me on two occasions relative to persons in whom I was interested who were in the asylum. I have no objection in the world to Mr. Fenning making the fees; I have no objection to Mr. Coldren making fees, but what I do think is this, that it is a very improper combination between the superintendent or head of that institution over there and Mr. Fenning or anybody else and that it might tend to raise the impression that the continuance of the residence of patients there might be affected by the interests of the committee.

Mr. HAY. Do I understand you to say, Mr. Evans, that Mr. Fenning came to you at your office and proposed the same arrangement as now exists between himself and Mr. Coldren?

Mr. EVANS. Precisely the same arrangement, yes.

Mr. HAY. Was he at that time in partnership with Mr. Coldren?

Mr. EVANS. I do not know. I think Mr. Fenning at that time had recently severed his connection with the United States pension agency of this city. Whether he had entered into partnership with Mr. Coldren or not I can not say.

Mr. HAY. Had he at that time been employed over there as guardian in any of these cases?

Mr. EVANS. He told me he had, but I have no personal knowledge of it. I really had no personal knowledge of the extent of Mr. Fenning's business in this line, as a committeeman, until the examination into the matter relative to the Logue case, which has been testified to by Mr. Thomas.

The CHAIRMAN. Would there be anything to prevent the judge from refusing to appoint Mr. Fenning or anybody else named in the petition?

Mr. EVANS. Nothing whatever. The judge could take it in his own hands. In a good many instances it is not considered proper to suggest the person who is desired to be appointed. An examiner in chancery, for instance——

The CHAIRMAN. I know. Has Mr. Fenning ever been accused of any improper action in regard to the moneys that have come into his hands as committee?

Mr. EVANS. Not to my knowledge.

The CHAIRMAN. These fees that are given to him and that are given to the attorney are given by the judge, who knows perfectly well that Mr. Coldren and he are in partnership?

Mr. EVANS. Yes, and I want to say here that the probability is that if there was any opposition made, in a good many of those cases relative to those fees, possibly the court might not sign the orders; but these are presented in merely a formal way. The papers may be handed to the court in the morning hour and are signed as a matter of form.

The CHAIRMAN. You do not mean to say that one of the judges of the supreme court of the District of Columbia awards compensation



in the way of counsel fees and fees to a committee without knowing what he is doing, do you?

Mr. EVANS. I say this, that the court in all these cases, unless it is an exceptional case, as testified to by Doctor White, and of which I have no knowledge, has nothing whatever to do with the allowance of these fees or commissions to the attorneys or to the doctors or to Mr. Fenning, except in this way: Mr. Fenning transacts his business, and gets in his fund, and then pays these fees, and he embodies them in his account. He then asks a reference of that account to the auditor. It is a mere formal reference and the court signs it as a matter of course. It goes to the auditor. There is no objection made before the auditor and the matter passes as a matter of course, and unless there is opposition made within thirty days it is final.

The CHAIRMAN. Do you mean to say that the judge signs the orders without knowing what fees he is giving to the lawyers and what fees he is giving to the committee?

Mr. EVANS. I say the judge, in a large number of instances, does not even have his attention called to the matter of the fees at all. As I say, it is merely a reference of the account, which is a formal matter, to the auditor.

The CHAIRMAN. I know——

Mr. EVANS. But the auditor of the court simply approves it, and says that the account is correct.

The CHAIRMAN. Who is the auditor of the court?

Mr. EVANS. The auditor of the court is Mr. Payne.

The CHAIRMAN. Is the auditor of the court a regular officer connected with the court?

Mr. EVANS. Yes.

The CHAIRMAN. Who receives a salary from the District of Columbia?

Mr. EVANS. Yes, and a very excellent gentleman, too.

The CHAIRMAN. Is he not supposed to do anything in connection with these fees? Would he not object if he believed the fees were unduly high?

Mr. EVANS. It would have to be outrageously, I think, to cause him to make any objection, unless there was objection made by somebody else.

Mr. HAY. In other words, it is like the settlement of an executor's account?

Mr. EVANS. Yes, precisely.

Mr. HAY. If nobody files an exception to the account, it goes as a matter of course?

Mr. EVANS. Yes.

The CHAIRMAN. That does not obtain, does it, Mr. Hay?

Mr. HAY. It does in every court that I have practiced in.

The CHAIRMAN. When it comes to the fixing of the compensation of attorneys?

Mr. HAY. Yes, sir.

The CHAIRMAN. I wish you would practice law in the surrogate court for the county of New York for a while.

Mr. HAY. I have been executor, and I have frequently paid my attorney's fees that I thought they were entitled to, and put those things in the accounts that I settled before the commissioner in

chancery. We have a commissioner in chancery in our State, and he approves it; my attorney presents the account to the court, and the court never looks at the items.

The CHAIRMAN. They do in the county of New York.

Mr. SMYSER. But, Mr. Hay, you never felt that you imposed upon the court or your client in the settlement of your accounts. I bet you did not.

Mr. EVANS, I want to ask you, in this connection—for I will gamble that Mr. Hay never imposed on a court in Virginia, or any place else, in the settlement of a trust that he was connected with—what is Mr. Fenning's standing as a member of the bar here?

Mr. EVANS. I have never heard anything against it. I must say that I am hardly in a position to answer that, because I am not acquainted with his standing.

Mr. SMYSER. Well, he has been a good deal in the lime light for the last sixty days.

Mr. EVANS. He has been a good deal in the lime light for a couple of years past, in these committee matters.

Mr. HAY. Very well. In the face of all that, taking all these things together, what do you say is his standing as a member of the bar here in the District of Columbia?

Mr. EVANS. It is just as good as anybody else's. I think he has the confidence of the court and I think he has the confidence of the community where he is acquainted.

I was going to state that the probate practice here is not quite as easy as Mr. Hay has described, in the matter of attorneys' fees, because in that particular matter you have got to get an order from our probate court to pay any fee to an attorney outside of the commission allowed the executor. If there are special services that require the special services of an attorney, the court upon presentation of the matter to the court—

Mr. HAY. I should have said that in the payment of fees to the attorney, the attorney generally says to the court, "I have allowed myself a fee of \$30, \$40, \$50, or \$100" or whatever it may be. The court knows what the fee is.

The CHAIRMAN. Things you have paid out during the administration of the estate. Yes, I acknowledge that.

Mr. HAY. I do not mean as executor, but as attorney. The attorney has to let the court know what the fee is that he has been allowed in this account.

Mr. EVANS. Yes.

Mr. HAY. And then the court can say whether that is a proper fee or not. I understood you to say that the court did not know at all, in this particular case, whether the fee was \$25 or \$75.

Mr. EVANS. In this particular case the attention of the court is not directed to it, unless there is exception taken to the action of the auditor, and the matter came up on the final hearing.

The CHAIRMAN. Do you mean to say that a judge in passing the account and giving the allowance, as we call it in New York County, to the attorney, at the final proceedings, does not know what the amount of that allowance is? Do you mean to say that it is handed up with the amount already fixed in it?

Mr. EVANS. I mean to say that in probably 19 out of 20 of these cases represented by Mr. Fenning—

The CHAIRMAN. I am not talking about Mr. Fenning particularly, but generally, in regard to everything of this character.

Mr. EVANS. I would not say that generally. I am talking about these cases.

The CHAIRMAN. Do you mean to tell me that a judge of the supreme court of the District makes an exception where Mr. Fenning is committee, as distinguished from cases where you, for instance, might be committee?

Mr. EVANS. I mean that in the peculiar practice relative to the appointment of these committees in these insane cases, the attention of the court is not directed to these charges in any cases, unless exceptions are taken to the report of the auditor, when the matter is then brought up before the court upon exceptions; but unless exceptions are taken to the report of the auditor the fees go through as a matter of course.

The CHAIRMAN. Does the auditor do any work?

Mr. EVANS. The auditor does a great deal of work. He is the auditor for all our courts.

The CHAIRMAN. Does not the auditor look at these figures?

Mr. EVANS. I have no doubt that the auditor looks at those figures.

The CHAIRMAN. Then is it not a reasonable thing to believe that i. the auditor has passed upon these fees as being reasonable, the court takes it for granted that the auditor has made such an examination, and when it comes before the court he takes the auditor's say-so for it?

Mr. EVANS. Why, precisely; taking the action of the auditor as the act of the court.

The CHAIRMAN. So that there is some way of curbing the rapacious greed of the attorney, is there not?

Mr. EVANS. Yes, sir; certainly.

The CHAIRMAN. And that is through the auditor?

Mr. EVANS. Certainly.

The CHAIRMAN. And that work, in your opinion, is done properly?

Mr. EVANS. I think so.

The CHAIRMAN. And the auditor unquestionably looks into these matters, and if he does not think they are reasonable he will so notify the court?

Mr. EVANS. If he did not think they were reasonable he would not confirm them in his report, and then the attorney would have to come before the court.

The CHAIRMAN. The auditor makes the report to the court, and then if there are no exceptions, the court takes the report of the auditor as being a proper report.

Mr. EVANS. The auditor makes this report and signs it, and it is then placed in the file of the department and remains there thirty days longer. If there are no exceptions it is filed. In the meantime the attorney prepares an order, comes before the court, and has the court sign the order approving it.

The CHAIRMAN. And the court naturally signs that in a perfunctory manner.

Mr. EVANS. The court signs that in a perfunctory manner.

The CHAIRMAN. Because the auditor has examined the matter and has found it correct?

Mr. EVANS. Yes.

The CHAIRMAN. And he trusts to the auditor to have examined it?

Mr. EVANS. That is right.

The CHAIRMAN. That is reasonable, is it not?

Mr. EVANS. That is right.

The CHAIRMAN. And if the auditor thinks the fees have been too high he will make his report to the court, and then, of course, it will be specifically brought to the attention of the court. Is not that true?

Mr. EVANS. That is right.

Mr. SMYSER. It could be brought to the attention of the court by the actual filing of exceptions, notwithstanding what the auditor may have done?

Mr. EVANS. Yes.

Mr. HAY. What does Mr. Coldren do?

Mr. EVANS. He is an attorney at law. I think his practice is largely before the Departments.

Mr. HAY. I wanted to find out what Mr. Coldren does in these cases. Does he present these orders to the court, or does Mr. Fenning do it?

Mr. EVANS. Mr. Fenning does the whole business. I do not think Mr. Coldren does anything at all. I want to state this, however, in this connection. In the Logue case I found that after the investment of \$300 had been ordered by the court, and the judge, Judge Stafford, passed an order compelling Mr. Fenning to pay \$200 cash, the note that represented the amount of that investment was cashed by Mr. Fenning. I found that Mr. Coldren was interested in that note. Whether that obtains in the rest of those investments—in nearly all those cases there is an investment of—

Mr. SMYSER. Interested how? How was Mr. Coldren interested in the note?

Mr. EVANS. Either as the maker or the indorser of the note.

Mr. SMYSER. Is he good?

Mr. EVANS. I know his name is on it. I don't know anything about his being good. It is a real-estate note, secured on real estate. That is simply another thing.

Mr. SMYSER. Seriously, suppose that is true. If, under the order of the court, this old soldier's money was loaned, with ample security in the way of real estate, would it make much difference?

Mr. EVANS. If I had a law partner I would not want to loan my ward's money to my law partner.

Mr. SMYSER. Not if the security was ample?

Mr. EVANS. Not even if the security was ample.

Mr. SMYSER. Out in our country you might be devilish glad to loan it wherever you could get that kind of security. We have so darn much money we don't know what to do with it. [Laughter.] That is no joke. I had a brother who resigned as executor because he couldn't loan money to good advantage. I said to him "You can't take the chances on this."

Mr. HAY. Is there anything else, Mr. Evans?

Mr. EVANS. Nothing, unless there are questions to be asked.

(The committee, at 5 o'clock p. m., adjourned until Thursday, June 14, 1906, at 10 o'clock a. m.)

HOUSE OF REPRESENTATIVES, *June 14, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Barchfeld, and Hay; also Mr. Evans, Doctor Emmons, Mr. Fenning, and others.

**TESTIMONY OF DR. A. BARNES HOOE.**

Dr. A. BARNES HOOE, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor, are you connected with St. Elizabeth's in any way?

Doctor HOOE. No, sir.

The CHAIRMAN. Have you ever been connected with it?

Doctor HOOE. No, sir.

The CHAIRMAN. Have you been there frequently?

Doctor HOOE. Yes, sir.

The CHAIRMAN. What do you know about a man by the name of Echols?

Doctor HOOE. I knew Mr. Echols for a number of years, before he was committed to the Government Hospital for the Insane. I treated him as a patient, and it was on my advice that he was committed there.

The CHAIRMAN. What was the matter with him?

Doctor HOOE. Mr. Echols was insane at the time he was committed to St. Elizabeth's. He stayed there until he died. I saw him a great many times while he was in St. Elizabeth's, and talked with him. At times he was perfectly rational, and again he would not know anyone at all. In my talks with him there he always spoke of the place as a beautiful place and said how glad he was that he was in there, and spoke of the excellent care and treatment that he got there. He spoke particularly of the table, how he was fed there.

The CHAIRMAN. Did he speak favorably of the food?

Doctor HOOE. I never heard anyone speak more highly of anything than he spoke of that place, in every connection.

The CHAIRMAN. What was his station in life before he went there?

Doctor HOOE. I believe he was in the Government Printing Office in some capacity. He was not a printer. I think he worked in what is called the foundry there. The class of work I do not know.

The CHAIRMAN. How long have you been practicing, doctor?

Doctor HOOE. Ten years.

The CHAIRMAN. Here in Washington?

Doctor HOOE. Here in Washington; yes, sir.

The CHAIRMAN. From your general observation of the hospital itself, what do you think of it?

Doctor HOOE. I think, sir, that it is the most wonderfully conducted institution in the world, and if I should ever be so unfortunate as to have to be committed to such an institution I hope to be fortunate enough to get into St. Elizabeth's.

The CHAIRMAN. Do you think that the attendants are proper attendants?

Doctor HOOE. I think so, from what I have seen, and I have been there a great many times, night and day; because I have had a great many friends who have been patients there at different times, and I

have a number there at this time. I have never seen anything there in the way of attention that I could suggest any improvement in.

The CHAIRMAN. What do you think of the character of the medical staff?

Doctor HOOE. Well, as to the character of the medical staff, I think the fact that Doctor White, the superintendent, was unanimously elected to membership in the Medical Society of the District of Columbia a short while ago by invitation, which is an unheard of thing here, shows the way the Medical Society of the District of Columbia regard the medical staff. That was not only a compliment to Doctor White individually, but to his staff. That was not done in the case of Doctor Richardson, I think, although an effort was made to have it done. There was no personal feeling against Doctor Richardson in the society in any way. This was done, I think, at this time to show that the medical fraternity of the District of Columbia deprecated this libelous action that has been taken against Doctor White and his staff over there, and was not in sympathy in any way with it.

Mr. HAY. What action do you refer to?

Doctor HOOE. The charges made by the society here known as the Medico-Legal Society, I believe.

Mr. HAY. How long did this gentleman of whom you speak as having advised that he go there, stay there?

Doctor HOOE. Mr. Echols?

Mr. HAY. Yes.

Doctor HOOE. I think he was there from about August, 1904, until February, 1906.

Mr. HAY. At which time he died?

Doctor HOOE. Yes, sir. They are approximately the dates. I do not remember exactly.

Mr. HAY. How many times have you been to the hospital in the last three years?

Doctor HOOE. That would be a very hard question for me to answer. Sometimes I have been there several times a week, and sometimes it would be several months before I was there.

Mr. HAY. How many wards of the hospital did you ever go through?

Doctor HOOE. I think—in fact I know—I have never been through all of the wards in the hospital, but I have been through a great many. I have no idea how many. It is a very large institution, and I do not know how many wards I have been through.

Mr. HAY. Have you been through ten or twenty?

Doctor HOOE. I have certainly been through as many as ten, and I think I have been through as many, probably, as twenty. I do not know about that. I have been through a great many of the departments there. I do not know whether they were known as different wards. The buildings are known by different names, and the wards by different names. I do not know just how they are subdivided there. I have been through a great many different departments there.

Mr. HAY. Did you ever take any meals at the hospital?

Dr. HOOE. No, sir. I never took a meal there. I took some refreshments there once some years ago under the management of Dr. Richardson—I think some ice cream and strawberries or something of that sort. I do not know what it was.

Mr. HAY. When you speak of the food there, then, you are speaking not of what you know yourself but of what you have heard?

Dr. HOOE. I have seen the food served to patients.

Mr. HAY. How often?

Dr. HOOE. I do not recall the number of times, but I have seen the food served to patients when I have been over there.

Mr. HAY. In what part of the hospital did you see the food served to patients?

Dr. HOOE. I do not recall what particular part of the hospital, whether it was in an open ward, where they just had sick patients, or where there were regular patients. I do not recall the part of it. I have seen the food served there, however.

The CHAIRMAN. Did you ever go into the large general dining room where five or six hundred persons eat?

Dr. HOOE. I have been in the large general dining room but not when they were eating. I remember several years ago going through their cooking department there, and the thing that attracted my attention particularly was the nice bread and the clean way in which it was handled. That was several years ago, under the management of Dr. Richardson.

The CHAIRMAN. When did you say Mr. Echols died?

Dr. HOOE. I think it was February of this year, about that time. I know it was very cold weather, because I went to Pennsylvania with his body. I know it was very cold weather at the time.

The CHAIRMAN. What were his initials, do you know?

Dr. HOOE. His initials were P. J.

The CHAIRMAN. I have a letter here of May 18——

Dr. HOOE. From his father?

The CHAIRMAN. No; from C. P. Echols.

Dr. HOOE. That is either his father or his brother. His father is C. P. Echols, in Carlisle, Pa. He has also a brother in New York, C. P. Echols. I also got a letter, a very pathetic letter.

Mr. HAY. Did you have a patient out there by the name of Mrs. Gorham?

Dr. HOOE. Yes; I sent Mrs. Gorham there. I saw her while she was in the institution, I think.

Mr. HAY. How was she satisfied?

Dr. HOOE. Mrs. Gorham is a woman who if she was in heaven would not like it.

Mr. HAY. So she was not satisfied?

Dr. HOOE. I do not suppose she was. She did not seem to be satisfied with anything at any time. I have only seen her once, I think, since she was committed. I may have seen her while in the asylum, but I do not remember. I saw her once after she was committed to the asylum. She came to call on me to see if I could get some evidence against somebody who had robbed her of some property or something. I do not recall just what it was.

The CHAIRMAN. There is a man, an attendant, by the name of Belt, who testified that Percy Echols had been taking liquid diet there, and that he saw a man by the name of Teates strike him and knock him down and knock him unconscious. Was that brought to your attention?

Dr. HOOE. That was never brought to my attention. It may have happened, and it may not have happened. I do not know anything

about that. Mr. Echols always spoke to me of the kind treatment he got there, and he spoke particularly of the kindness of the attendants.

The CHAIRMAN. In this letter that I received from his father or brother, whichever it is—

Dr. HOOE. If it is from Carlisle, Pa., it is from his father.

The CHAIRMAN. Yes, it is from Carlisle, Pa.

Dr. HOOE. That is the father.

The CHAIRMAN. The father states in the letter that there was a sister of this patient, Mary Echols, who visited Percy Echols in October, 1905; that Percy Echols then told his sister that he was receiving bad treatment there. Did you ever see Mary Echols? Did she ever tell you anything of this kind?

Dr. HOOE. She never told me that. I do not recall her ever having mentioned that to me. I think I have seen all of his family, with the exception of one sister, and that was not Miss Mary Echols.

The CHAIRMAN. Did the father ever make any complaint to you about the treatment Percy Echols received?

Dr. HOOE. When I went to Pennsylvania with the body his family said how glad they were that they had taken my advice and had had him committed to St. Elizabeth's. They said he had gotten better care there than he could have gotten anywhere else. The family told me that when I was there in the winter, in February, or in the late winter, with the body.

The CHAIRMAN. Did you ever have any occasion to see the feeding tube used there?

Dr. HOOE. I am convinced that I have never seen it used there, but I have sent two patients there myself, whose lives I am sure were saved by the feeding tubes, and I advised very strongly to have another sent there Friday. He went Saturday. He is an old gentleman, and I sent him there because they are more skillful in using the feeding tubes there than they are anywhere else. He is insane, and I advised him to go there and have the medical staff at the asylum save his life, or prolong it, by feeding in that way. He was in a hospital, but they could not do it very well.

Mr. HAY. Do you say he is sane?

Dr. HOOE. Insane. He has senile dementia. He is about 86 years old, and his family could not do a thing with him.

#### TESTIMONY OF DR. WILLIAM L. ROBINS.

Dr. WILLIAM L. ROBINS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you a practicing physician here in Washington?

Dr. ROBINS. Yes, sir.

The CHAIRMAN. How long have you been practicing medicine?

Dr. ROBINS. Since March, 1890. I am not a general practitioner, sir.

The CHAIRMAN. You are a specialist?

Dr. ROBINS. I am a specialist.

The CHAIRMAN. What is your specialty?

Dr. ROBINS. Nervous and mental diseases.

The CHAIRMAN. Have you ever had occasion to have a patient sent to St. Elizabeth's?



Dr. ROBINS. I have sent a great many to St. Elizabeth's; yes, sir.

The CHAIRMAN. Do you visit St. Elizabeth's constantly to see these patients?

Dr. ROBINS. I have been to St. Elizabeth's probably, in the past three or four years, from six to ten times every year.

The CHAIRMAN. From six to ten times every year?

Dr. ROBINS. I should think so.

The CHAIRMAN. To visit patients that you had sent over there?

Dr. ROBINS. Yes, sir. I have been over there under various circumstances. I have been there with physicians who were here from other institutions, and who would like——

The CHAIRMAN. You mean to show them the institution?

Dr. ROBINS. To show them the institution, you know; and I have been over to see patients. I have been there to examine patients at the instance of the court, and I have been over, of course, to see my own patients who were there.

The CHAIRMAN. When you have gone there to examine patients at the instance of the court, had the court selected you as one of the physicians to examine them?

Dr. ROBINS. Yes, sir.

The CHAIRMAN. Are you paid generally in those cases?

Dr. ROBINS. Oh, yes.

The CHAIRMAN. For making the examination?

Dr. ROBINS. Yes, sir. That has not been done in the past two years, however, two or three years.

The CHAIRMAN. Do you mean that you have not been paid in the last two or three years, or that you have not been there?

Dr. ROBINS. The court has not selected physicians especially for that purpose in the past two or three years.

The CHAIRMAN. What do you think generally in regard to the care and treatment of patients there?

Dr. ROBINS. I have never seen anything but the kindest of treatment at St. Elizabeth's in my visits there. I have been in a great many of the different wards to examine cases, both males and females.

The CHAIRMAN. Does that answer apply to the nurses and attendants as well as to the medical staff?

Dr. ROBINS. Yes, sir.

The CHAIRMAN. You have found that your patients have been properly cared for?

Dr. ROBINS. I have never had any complaint from any patient at all. I should think if they had been improperly treated I would have some complaint from them themselves.

The CHAIRMAN. Has there ever been any difficulty about your seeing a patient as often as you wanted to?

Dr. ROBINS. Oh, no; I am acquainted with everyone over there, and there would not be any difficulty about that at all; no, sir.

The CHAIRMAN. Access has always been accorded to you, without any trouble?

Dr. ROBINS. Always.

The CHAIRMAN. Do you know anything about the food there?

Dr. ROBINS. No, sir; I do not think I have ever—I am sure I have never seen the food at all. I have never been out there at a time when they were partaking of food

The CHAIRMAN. Has any one of your patients ever complained about the food or anything?

Dr. ROBINS. No, sir.

The CHAIRMAN. You were formerly connected with another insane institution?

Dr. ROBINS. Yes, sir; the Maryland Hospital for the Insane.

The CHAIRMAN. Where was it?

Dr. ROBINS. At Catonsville, Md.

The CHAIRMAN. How large an institution is that?

Dr. ROBINS. They have now about 750 patients, I think. They had then about 650.

The CHAIRMAN. How do these institutions compare in the manner of the treatment of patients, and generally?

Dr. ROBINS. Well, the Government Hospital for the Insane has better facilities in every respect than the Maryland Hospital for the Insane. I have visited other institutions also.

The CHAIRMAN. What other institutions have you visited?

Dr. ROBINS. I visited the medical director of the New Jersey State Hospital for the Insane, for six weeks, three years ago.

The CHAIRMAN. Where is that?

Dr. ROBINS. I was there studying. That is at Morris Plains, N. J.

The CHAIRMAN. That is a large institution, is it not?

Dr. ROBINS. That institution has about three thousand patients.

The CHAIRMAN. So it is a little bit larger than this one?

Dr. ROBINS. I should think they are about the same size.

The CHAIRMAN. How do you think that institution compares with this one?

Dr. ROBINS. That institution has not the means that this institution has. They are very much restricted on account of their appropriations, but I think that St. Elizabeth's is better conducted than any institution I know of.

The CHAIRMAN. What other institutions have you visited besides the one at Morris Plains.

Dr. ROBINS. I have visited the other institution in Maryland, at Springfield. That is the Second Hospital for the Insane. I have visited the Bethlehem Institution in London.

The CHAIRMAN. How large an institution is that?

Dr. ROBINS. That is a very old institution. I really do not know how large it is. I would not like to compare anything with that. They have the old, old methods there. The patients are down in the cellars, and all that sort of thing. I would not like to compare anything with Bethlehem.

The CHAIRMAN. Have you ever visited any of the institutions of New York State?

Dr. ROBINS. Only casually. I have been through, I think, one institution in New York State, but it was a great many years ago. That was when I first graduated in medicine. I would not recall it.

The CHAIRMAN. You have not any particular information about it. Are there any other large institutions that you have visited?

Dr. ROBINS. I think not.

Mr. HAY. Doctor, you say you have not been called upon to go to examine patients out there for some two or three years?

Dr. ROBINS. Yes, sir.

Mr. HAY. On the order of the court?

Dr. ROBINS. Yes, sir.

Mr. HAY. I rather gather from what you said that prior to that time the court had some physicians that it was always in the habit of sending. Is that true?

Dr. ROBINS. No, sir; two or three years ago the fees were entirely different. They had a \$10 fee for every examination, and required each physician to go over to the asylum to examine a case within, I think, five or six days of the trial by jury; but now the system is different. The two physicians who commit the patient are called upon at the trial, although very often the trial occurs a month after the commitment—that is, not more than a month I think—and they have then one physician who examines all of the cases. At the present time Dr. Hunt is examining all of the cases, and I shall be the one to examine them, alternating with Dr. Hunt. The Commissioners selected two of us to examine the cases, and we agreed that we would alternate.

Mr. HAY. You are paid a fee in each case, or are you paid so much a year?

Dr. ROBINS. Always a per diem. A compensation of \$10 per diem is attached to it. It is not so much the fee as it is the honor, I presume.

Mr. HAY. Doctor, what do you think of the advisability of a lunacy commission?

Dr. ROBINS. I am very sure that a lunacy commission—I do not know as to the advisability of a lunacy commission in the District, whether it would be practical or not. In the State of Maryland the lunacy commission certainly is an extremely valuable addition. The lunacy commission has a secretary who visits all of the institutions where the insane are confined, at frequent intervals. The commission itself does not visit these institutions very often, but they are compelled to visit them, as I understand, at stated intervals. The secretary, however, visits these institutions frequently. At the time I was connected with the Maryland Hospital for the Insane the secretary of the lunacy commission was a very positive gentleman, who made it known to every patient that if he had any grievance he should tell it, and they did not hesitate to do so very frequently. Of course, sometimes there were things that we had not heard of at all, and did not know anything about. Maybe they would wait until he came around, and spin their little yarn. On other occasions we had already investigated the case, and sometimes, of course, found that what they said was true. Insane people will misrepresent things very often, of course.

Mr. HAY. You say you do not know whether it would be advisable here or not. Why would it not be as advisable here as anywhere else?

Dr. ROBINS. Well, the lunacy commission of Maryland has a very difficult task before the insane are scattered throughout all the almshouses—

Mr. HAY. But I am speaking now with a view of getting your idea as to whether or not it would not be for the advantage of the asylum, as well as of the inmates, to have someone to go up and down there and examine things, without the authorities being informed?

Dr. ROBINS. Of course, I think undoubtedly that some one ought to supervise any insane institution.

Mr. HAY. You think there ought to be some——

Dr. ROBINS. Of course, I can see how a board of managers could do that just as well as anyone else.

Mr. HAY. The members of the board, though, say that they go through at stated periods, known to the asylum authorities. Is that the sort of inspection that ought to be had over an institution of that kind?

Dr. ROBINS. No; I should think not. I know the secretary of the lunacy commission never notified us when he was coming at all. He pounced down on us at any time.

Mr. HAY. Is not that the sort of inspection that all institutions now have throughout the country?

Dr. ROBINS. I believe it is; yes, sir. I know the post-office inspectors appear at most any time without any notice at all.

Mr. HAY. And the inspectors at army hospitals?

Dr. ROBINS. Yes, sir; undoubtedly so.

Mr. HAY. And insane asylums throughout the States?

Dr. ROBINS. Yes, sir.

Mr. HAY. New York——

Dr. ROBINS. New Jersey has not had a lunacy commission until—well, they do not call their commission a lunacy commission now. They have a charities and corrections committee, and their secretary visits all these institutions. That is a recent thing, I believe, there.

The CHAIRMAN. What is the name of this secretary in Maryland?

Dr. ROBINS. His name is Dr. George J. Preston—the present secretary. He was not secretary when I was connected with the hospital.

#### TESTIMONY OF JAMES F. OYSTER.

JAMES F. OYSTER, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. What is your business?

Mr. OYSTER. The butter, eggs, and cheese business.

The CHAIRMAN. Here in the city of Washington?

Mr. OYSTER. Yes, sir.

The CHAIRMAN. Do you supply any goods to the St. Elizabeth's Asylum?

Mr. OYSTER. We sell them eggs.

The CHAIRMAN. Do you make a contract with the Secretary of the Interior for supplying eggs?

Mr. OYSTER. No, sir; they purchase on the open market, I think, sir.

The CHAIRMAN. How many do they purchase from you, approximately?

Mr. OYSTER. Well, six or eight hundred dozen a week. They do not do that every week. Sometimes they skip us.

The CHAIRMAN. Who makes that purchase?

Mr. OYSTER. The order is given by Mr. A. E. Offutt, the purchasing agent.

The CHAIRMAN. Does he usually come over himself?

Mr. OYSTER. Quite frequently; yes, sir.

**The CHAIRMAN.** What kind of eggs do you furnish the hospital?

**Mr. OYSTER.** We send over there the best we can buy. Money can not buy them any better, sir, and we use every care that it is possible to use before sending them over there. Every egg is examined carefully through an electric light. We have an egg candler, a man of experience, and all the eggs we sell we have candled.

**The CHAIRMAN.** You have what?

**Mr. OYSTER.** We have a candler to examine them.

**The CHAIRMAN.** Oh, yes, a candler. Do you ever supply butter to the hospital at all?

**Mr. OYSTER.** Not recently; no, sir.

**The CHAIRMAN.** Have you since Dr. White has been there? That is, since October, 1903?

**Mr. OYSTER.** Possibly once or twice only. I do not recall the last order. It has been some time ago.

**The CHAIRMAN.** You have sold butter, I suppose, to some of the physicians there, have you not?

**Mr. OYSTER.** They may come into the store and get it; yes, sir. The wagon comes there occasionally for a little order of some kind. I do not know just who he gets it for.

**The CHAIRMAN.** That butter that is sold in that way is not billed to the asylum at all, is it?

**Mr. OYSTER.** Not at all.

**The CHAIRMAN.** That is billed to the individuals?

**Mr. OYSTER.** To the individuals; yes, sir.

**The CHAIRMAN.** Did the hospital ever send any eggs back to you as not being up to the standard?

**Mr. OYSTER.** I have no recollection of any coming back; no, sir.

**The CHAIRMAN.** Did you ever have any complaint of the condition or character of any eggs that you have sent there?

**Mr. OYSTER.** None that I recollect of, of a serious nature. Possibly something might be said by the storekeeper, that one or two eggs were bad, but I have had no general complaint. We do not have, as a rule. Of course it is possible for an egg to be skipped, in the quantity we examine every day, but it is only possible.

**The CHAIRMAN.** Are these eggs that are furnished the hospital cold-storage eggs?

**Mr. OYSTER.** No, sir.

**The CHAIRMAN.** Where do the eggs come from, most of them?

**Mr. OYSTER.** Most of them come from Virginia, near-by counties here, and down the river, but principally from Virginia. We have people who gather them up through Virginia, haulers, who bring them to us in wagons, and they are shipped up the river by boats.

**The CHAIRMAN.** How long does an egg remain eatable under those circumstances?

**Mr. OYSTER.** Oh, eggs will keep a long time if they are carefully handled. Our eggs are hauled to us. They are gathered up every week or ten days. Some of our haulers do not get in oftener than once in ten days. Others come in weekly. We do not keep them on hand at all. We keep them moving right out.

**The CHAIRMAN.** Do you supply eggs to other institutions here in Washington?

**Mr. OYSTER.** Almost all of them.

The CHAIRMAN. Is the character of the eggs that are supplied to St. Elizabeth's the same as the character of eggs supplied to the others?

Mr. OYSTER. They are just as good as we send to the family trade of Washington, sir. We are large retailers, and we sell a good many eggs to families.

The CHAIRMAN. I think you sell some to me; I do not know, though.

Mr. OYSTER. I hope they are all right, sir. We sell to all the institutions, pretty much.

The CHAIRMAN. Do you think it would be a possible thing to have these eggs sold to the asylum more cheaply if a contract was entered into?

Mr. OYSTER. I do not think it would do nearly as well; no, sir. I think that was tested in Dr. Godding's time, and they had a great deal of trouble, both with butter and eggs. My recollection is that he recommended to the Secretary of the Interior that perishable goods be cut out of contracts, and be bought on the open market. I am inclined to think the prices are just as good if not a little better by buying on the open market than by buying on contract.

The CHAIRMAN. The price of eggs varies, of course.

Mr. OYSTER. The price varies a good deal, and if they are bought by the year there is a tendency to store them and put them away, and there is a possibility that they will not be as fresh as if they got them weekly or semiweekly, as they get them now.

#### TESTIMONY OF JOHN F. JAVINS.

JOHN F. JAVINS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your name?

Mr. JAVINS. John F. Javins.

The CHAIRMAN. What is your business?

Mr. JAVINS. I am a fish dealer.

The CHAIRMAN. In this city?

Mr. JAVINS. Yes, sir.

The CHAIRMAN. How long have you been in that business?

Mr. JAVINS. I have been in it a little over twenty-five years, doing business for my father. He has been in business a little over fifty years.

The CHAIRMAN. Do you sell fish to St. Elizabeth's?

Mr. JAVINS. We have been doing so in the last four or five years; yes, sir.

The CHAIRMAN. You have a general contract with them?

Mr. JAVINS. No, sir; we have no contract.

The CHAIRMAN. Who buys the fish.

Mr. JAVINS. Mr. Offutt.

The CHAIRMAN. What kind of fish do you sell them?

Mr. JAVINS. We sell them the best the market affords.

The CHAIRMAN. Both fresh and salt?

Mr. JAVINS. No; only fresh.

The CHAIRMAN. What kind of fish do you sell them? I mean what fish are they that you sell to them?

Mr. JAVINS. We sell them different kinds. Sometimes we sell them shad, sometimes herring, fresh cod, or halibut, haddock, and bluefish. They never like soft fish. They always want good, firm fish. Any time any soft fish goes over there they return it. They will not receive it.

The CHAIRMAN. How many pounds of fish do you sell them a week?

Mr. JAVINS. About 1,200 pounds. We sell them a little less sometimes, and sometimes more.

The CHAIRMAN. Where do you get the fish?

Mr. JAVINS. We get them off the Potomac, and we buy some in Baltimore and in New York. We buy all over. At times, in the winter, we have to buy away, because we can not get anything here.

The CHAIRMAN. Do you buy cold-storage fish?

Mr. JAVINS. No, sir; I have a cold storage, but we don't freeze any fish, sir. We use it for poultry and other things like that—for making ice, etc.

The CHAIRMAN. Do you sell anything but fish?

Mr. JAVINS. No, sir; that is all—fresh fish.

The CHAIRMAN. Do you supply other institutions here in the city of Washington?

Mr. JAVINS. Yes, sir; nearly all of them.

The CHAIRMAN. Is the character of the fish that you sell to St. Elizabeth's the same as the character of that you sell to other institutions?

Mr. JAVINS. We have to be more particular with them than with any other customer.

The CHAIRMAN. Why?

Mr. JAVINS. They are particular over there. They are a little against me, because they have a party there that don't like me very well and I have to be very careful on his account.

The CHAIRMAN. Who is he?

Mr. JAVINS. I don't like to mention his name.

The CHAIRMAN. Well, we do not care for it.

Mr. JAVINS. He had an old favorite, that he would have rather had the trade than I, and on that account I have to be very careful what I send over.

The CHAIRMAN. Do you often have fish returned?

Mr. JAVINS. Well, a few are returned; yes, sir. We have had some returned, but not often. They have been inspected after they came back, and pronounced good by the health officer, and we have sold them two days after that. They have been good then.

The CHAIRMAN. So you think that if anything the institution is too rigid?

Mr. JAVINS. They get better goods from us than private families get. I can swear to that.

The CHAIRMAN. Has there ever been any suggestion on the part of anybody in the hospital that they ought to be remembered by a tip, or anything of that kind?

Mr. JAVINS. No; I have had no dealings with anybody from there. I never met anybody from there, only Mr. Offutt.

The CHAIRMAN. Only Mr. Offutt?

Mr. JAVINS. That is all, sir. We have to sell for less than anybody else to hold them, too, I know that; because they get price

lists every day. They are hunting it up and telephoning for prices all the time.

The CHAIRMAN. Do you think the institution would save any money if it made an annual contract with you?

Mr. JAVINS. They could not do that. Nobody would like to take an institution of that kind on their hands, because there are times that we would like to throw the order down and not accept it at all, and if we contracted we would be liable to get in trouble. There are times, you know, when we would not have what they want, and they would buy somewhere else.

The CHAIRMAN. Do you mean that you would not bid?

Mr. JAVINS. I could not bid. It would not justify either one, sir, because I would have to price them away out of the way entirely.

The CHAIRMAN. In order to save yourself at a time when there were high prices?

Mr. JAVINS. Yes; and keep from losing money.

#### TESTIMONY OF GEORGE P. SACKS.

GEORGE P. SACKS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Sacks, what is your business?

Mr. SACKS. I am secretary-treasurer of Golden & Co., commission merchants, and pork and bean packers, handlers of poultry, etc.

The CHAIRMAN. Do you furnish provisions to St. Elizabeth's?

Mr. SACKS. We do; yes, sir.

The CHAIRMAN. What kind of provisions?

Mr. SACKS. I think we have had the contract for the past year on lard and corned beef, and we sell them a good bit of fresh poultry, but that is purchased on the open market.

The CHAIRMAN. The lard and corned beef are purchased under annual contract made by the Secretary of the Interior?

Mr. SACKS. Yes, sir.

The CHAIRMAN. And after competitive bidding?

Mr. SACKS. Yes, sir.

The CHAIRMAN. The poultry, however, is purchased on the open market?

Mr. SACKS. Yes, sir.

The CHAIRMAN. Where do you get the corned beef that you sell?

Mr. SACKS. It comes from cattle which we slaughter, either from native cattle—

The CHAIRMAN. You mean here in Washington?

Mr. SACKS. At our abattoir in Virginia, across the bridge, and some few western cattle which we receive on consignment.

The CHAIRMAN. Do you corn the beef yourself?

Mr. SACKS. Personally?

The CHAIRMAN. No; I mean your establishment.

Mr. SACKS. Yes; our establishment does.

The CHAIRMAN. Have you ever had any complaint about that corned beef?

Mr. SACKS. We have.

The CHAIRMAN. Has corned beef been sent back to you?

Mr. SACKS. Yes, sir.



The CHAIRMAN. Have the complaints, in your mind, been just ones?

Mr. SACKS. I do not think they were exactly well founded, for the simple reason—this is my understanding of it; I am not well versed in that particular line—that it seems if the cut of beef is irregular, or should be thin, or there is some other fault found with it, part of it would be sent back, and for that reason when a requisition is made for 1,800 or 3,000 pounds of corned beef, we always send a little over, to permit the inspectors to throw out anything which is undesirable for some cause or other.

The CHAIRMAN. What does your contract call for as to the maximum and minimum size of the beef you furnish?

Mr. SACKS. I can not answer that. I am not versed in that.

The CHAIRMAN. How is this corned beef sent to them?

Mr. SACKS. It is sent in paper-lined, clean sugar barrels, I think.

The CHAIRMAN. How much do the pieces of corned beef that go there weigh—each individual piece?

Mr. SACKS. I imagine they weigh about 20 pounds or more; probably more than that, I presume. They call for certain meat and a certain size, and we have to comply with those instructions.

The CHAIRMAN. Were there ever complaints about the beef you sold to them being tainted?

Mr. SACKS. Not to my knowledge.

The CHAIRMAN. Do you sell to other institutions here in Washington?

Mr. SACKS. We do; yes.

The CHAIRMAN. What others?

Mr. SACKS. We sell to the Soldiers' Home and the Freedmen's Hospital. That is about all I can recall in town here, and we had a contract at League Island last year, in Philadelphia, for the Navy. We have not had a word of complaint from any of the other sources.

The CHAIRMAN. Is St. Elizabeth's the only place from which you have ever had complaints?

Mr. SACKS. Yes, sir; and they are awful particular. There is no question about that. It is recognized at our establishment that anything that goes to St. Elizabeth's must be A No. 1.

The CHAIRMAN. You think the inspection over there is more rigid than it is even at the Soldiers' Home and at League Island?

Mr. SACKS. I can not say as to League Island, because we never supplied them provisions. That was simply butter and cheese. But the Soldiers' Home is particular, too. They get bacon from us of a required size and standard and so on. There is no complaint from them at all.

The CHAIRMAN. Do you sell bacon to St. Elizabeth's too?

Mr. SACKS. No; we do not. We have simply had the lard and corned beef contract for the last season.

The CHAIRMAN. About how much corned beef do you supply St. Elizabeth's a week?

Mr. SACKS. Approximately 2,100 or 2,000 pounds. I think one week it calls for 1,800 and the following week 3,000 pounds, alternately.

The CHAIRMAN. How about poultry?

Mr. SACKS. The poultry is absolutely A No. 1. They will not have anything that is not absolutely fresh-killed stock. That poultry is

slaughtered, say, this afternoon or late this evening and delivered to the hospital the following morning.

The CHAIRMAN. It is not cold-storage poultry?

Mr. SACKS. No; they will not receive it.

The CHAIRMAN. Has any suggestion ever been made to you by any of the employees connected with the institution to the effect that commissions of any kind ought to be paid on purchases?

Mr. SACKS. No, sir; I do not think they would accept anything, although no overtures have been made one way or the other from either side.

The CHAIRMAN. You think the stuff sent there is good, do you?

Mr. SACKS. I certainly do.

#### TESTIMONY OF GEORGE T. WADE.

GEORGE T. WADE, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Wade, what is your business?

Mr. WADE. I am in the fruit and vegetable business.

The CHAIRMAN. You furnish supplies to St. Elizabeth's?

Mr. WADE. We do sometimes; yes, sir.

The CHAIRMAN. Is what you sell to them sold in the open market?

Mr. WADE. Yes, sir.

The CHAIRMAN. You have no contract?

Mr. WADE. No, sir.

The CHAIRMAN. Would that be practicable in your business?

Mr. WADE. No, sir; it would not.

The CHAIRMAN. Why; because the price varies?

Mr. WADE. The price varies too much, and also the quality.

The CHAIRMAN. What kind of fruit do you furnish them?

Mr. WADE. We sell them apples, blackberries, strawberries, raspberries, and such as that. We sell them potatoes sometimes, and onions and cabbage.

The CHAIRMAN. Did you ever have any complaint made as to the character of the stuff you furnished?

Mr. WADE. No, sir; I never have; because I would not send anything there but what is first class. They would not have anything from me that was not first class, and I would not send anything else. I am very particular about what I send to them.

The CHAIRMAN. Do you sell to other institutions?

Mr. WADE. Yes, sir.

The CHAIRMAN. And private parties also?

Mr. WADE. We sell to hotels and dining rooms; etc., yes, sir.

The CHAIRMAN. How does the quality of the goods you send to St. Elizabeth's compare with what you send to other places?

Mr. WADE. We have to send them the best we have all the time. They will not buy anything else from me.

The CHAIRMAN. Who buys from you? Mr. Offutt?

Mr. WADE. Mr. Offutt; yes, sir.

The CHAIRMAN. What do your sales amount to with the institution there?

Mr. WADE. Some days we sell them a couple of hundred dollars' worth, and sometimes we do not sell them anything for two or three weeks. I have no idea what it would amount to.

The CHAIRMAN. Is Mr. Offutt particular as to what he buys?

Mr. WADE. Yes, sir. He buys as cheaply from me as anybody else does all the time, but he buys the best. That is, to get the best he buys as cheap as anybody.

The CHAIRMAN. Did you ever have any suggestion from him, or anybody else connected with the asylum, as to getting anything in the form of a commission?

Mr. WADE. No; in no way, shape, or form.

Mr. HAY. Do you furnish supplies to any other institution here?

Mr. WADE. Yes; to the Soldiers' Home and Providence Hospital. In fact, a good many institutions.

Mr. HAY. Do they buy on the open market?

Mr. WADE. Yes, sir; on the open market.

Mr. HAY. All of the institutions to which you furnish supplies?

Mr. WADE. All the institutions except the Government. We furnish the Government, you understand, but that is on contract. We furnish potatoes and onions for the Government, for the Washington Barracks, Fort Myer, and two or three forts down the river. That is on monthly contract—the potatoes and onions.

Mr. HAY. You do furnish some, then, on contract?

Mr. WADE. Yes; to the Government.

Mr. HAY. Is that the same class of goods you send to St. Elizabeth's?

Mr. WADE. No, sir; the institution buys everything in my line on the open market.

Mr. HAY. I know, but the goods you furnish on contract I am referring to. Are they the same?

Mr. WADE. No, sir; only onions and potatoes on contract.

Mr. HAY. Can you furnish onions and potatoes on contract as cheaply as you can on the open market?

Mr. WADE. No; I think it is best to buy everything in the fruit and vegetable line on the open market.

Mr. HAY. Including both onions and potatoes?

Mr. WADE. Everything, I think; yes, sir.

#### TESTIMONY OF WILLIAM F. ADAMS.

WILLIAM F. ADAMS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Adams, what is your business?

Mr. ADAMS. I am a commission merchant, selling fruits and vegetables.

The CHAIRMAN. Do you sell things to St. Elizabeth's?

Mr. ADAMS. Yes, sir; we do.

The CHAIRMAN. What kind of fruits and vegetables do you sell them?

Mr. ADAMS. I sell them potatoes, cabbage, berries, and water-melons.

The CHAIRMAN. They are bought from you on the open market, I suppose?

Mr. ADAMS. They are bought on the open market.

The CHAIRMAN. Is Mr. Offutt the man who does the buying?

Mr. ADAMS. Mr. Offutt does the buying; yes.

The CHAIRMAN. What is the quality of the supplies you furnish to them?

Mr. ADAMS. Everything I send there has been first class. Nothing has been returned, only a few watermelons occasionally that were cut green, and I always made those good.

The CHAIRMAN. Are they particular? Is Mr. Offutt particular in regard to the character of the food?

Mr. ADAMS. He is very particular. He is about as particular as any of the people we sell to on the market, grocery men and market dealers.

The CHAIRMAN. Have you a general trade with hotels and private individuals?

Mr. ADAMS. Yes.

The CHAIRMAN. And public institutions.

Mr. ADAMS. I do not sell to many public institutions. St. Elizabeth's buy quite a good lot from me. I suppose they buy more fruits and vegetables from me than anyone in Washington.

The CHAIRMAN. What does your trade amount to in the course of a week or a month, approximately?

Mr. ADAMS. I think it would average—last year it averaged about five or six hundred dollars a month. Some months it has been as high as twelve or fifteen hundred dollars, and sometimes only a couple of hundred dollars.

#### TESTIMONY OF JOSEPH ATKINS.

JOSEPH ATKINS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your business?

Mr. ATKINS. I am in the grocery business, sir.

The CHAIRMAN. Are you associated with Mr. Hume?

Mr. ATKINS. I am manager.

The CHAIRMAN. Do you sell goods to St. Elizabeth's?

Mr. ATKINS. Yes, sir; under contract and on the open market.

The CHAIRMAN. Both?

Mr. ATKINS. Both; yes, sir.

The CHAIRMAN. What do you contract for with the Interior Department?

Mr. ATKINS. Apples, peaches, soap—

The CHAIRMAN. Beans?

Mr. ATKINS. Beans, yes. I can not remember all of them. There are eight or ten items.

The CHAIRMAN. Do you sell them any canned vegetables?

Mr. ATKINS. Canned tomatoes, yes.

The CHAIRMAN. Is that under contract?

Mr. ATKINS. Yes.

The CHAIRMAN. What do you sell in the open market to them?

Mr. ATKINS. It does not amount to much—not a hundred dollars a year—lard oil, or a little something like that.

Mr. HAY. Lard?

Mr. ATKINS. Lard oil.

The CHAIRMAN. What have you to say about the character of the supplies you furnish the hospital?

Mr. ATKINS. We submit samples to the Interior Department, and they generally select standard goods, you know.

The CHAIRMAN. As to the character of the beans supplied by you, are they good beans?

Mr. ATKINS. They are Michigan hand-picked beans.

The CHAIRMAN. Are they considered the best on the market?

Mr. ATKINS. Yes; they are just as good as any, you know. The New York beans sometimes are better, and sometimes the Michigan beans. It depends upon the weather, you know.

The CHAIRMAN. What does your contract with St. Elizabeth's amount to in the course of a year, approximately?

Mr. ATKINS. About \$1,000 or \$1,200 a month.

The CHAIRMAN. Did you ever have any complaint as to any of your supplies?

Mr. ATKINS. I have had one this year.

The CHAIRMAN. What was it?

Mr. ATKINS. Evaporated peaches. They returned them to me.

The CHAIRMAN. These peaches that you sell are evaporated peaches?

Mr. ATKINS. Yes, sir.

The CHAIRMAN. You do not sell any fresh peaches?

Mr. ATKINS. No, sir.

The CHAIRMAN. Was that rectified?

Mr. ATKINS. Oh, yes.

The CHAIRMAN. Do you think the people over there are particular as to the quality of goods they get?

Mr. ATKINS. I have always found them to be.

The CHAIRMAN. Do you sell to other institutions?

Mr. ATKINS. Yes, sir.

The CHAIRMAN. The Soldiers' Home?

Mr. ATKINS. Yes; the Soldiers' Home.

The CHAIRMAN. Do you sell to the army post at Fort Myer?

Mr. ATKINS. Yes, sir; they contract monthly.

The CHAIRMAN. Do you think that it is advantageous to contract monthly? I mean advantageous to the purchaser of the goods.

Mr. ATKINS. I think so; yes.

The CHAIRMAN. You think that Fort Myer, for instance, which contracts monthly, gets better prices than St. Elizabeth's where they contract, say, for a year?

Mr. ATKINS. Yes, sir.

The CHAIRMAN. How do you think the inspection at Fort Myer compares with that at St. Elizabeth's?

Mr. ATKINS. The inspection at St. Elizabeth's—well, they are very particular at St. Elizabeth's.

The CHAIRMAN. More so than they are at Fort Myer?

Mr. ATKINS. I have never had any trouble at Fort Myer. Everything went through.

Mr. HAY. Do I understand, Mr. Atkins, that this is the only institution that has a contract by the year?

Mr. ATKINS. All the other institutions have annual contracts except the Army.

Mr. HAY. They all have contracts by the year except the Army?

Mr. ATKINS. Yes, sir.

## TESTIMONY OF NICHOLAS SHEA.

NICHOLAS SHEA, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Shea, what is your business?

Mr. SHEA. I am in the wholesale grocery and liquor business.

The CHAIRMAN. Do you sell produce of any kind to the hospital?

Mr. SHEA. Groceries principally.

The CHAIRMAN. What kind of groceries do you sell?

Mr. SHEA. Well, tea—at least a year ago—and coffee, rhubarb, buckwheat, hominy, and cornstarch. I think I had five articles this year that is closing now, on the 1st of July.

The CHAIRMAN. Do you make an annual contract with the Secretary of the Interior?

Mr. SHEA. I make an annual contract with the Secretary of the Interior.

The CHAIRMAN. After competitive bidding?

Mr. SHEA. After competitive bidding.

The CHAIRMAN. Do you sell to any other institutions?

Mr. SHEA. Yes, sir; I sell to Providence Hospital, the Soldiers' Home, and some of the army posts; but the army posts contract by the month.

The CHAIRMAN. Do you think it more advantageous to contract by the month than by the year?

Mr. SHEA. I think it is more advantageous for the institutions to contract for the year, because there may sometimes be fifty bidders, and they take the lowest bid, and quite often the parties lose money.

The CHAIRMAN. Have you ever lost any money on contracts with St. Elizabeth's?

Mr. SHEA. Sometimes, yes. For instance, if fifty men bid on coffee, they will pick the lowest bidder who offers a good article. Probably forty of those bidders would not take it at the same price if they were offered it. They have the opportunity of selecting everything at the lowest price, and there is that risk of men bidding too low where they are competing with each other.

The CHAIRMAN. Do you send samples to the institution?

Mr. SHEA. Yes; they require samples.

The CHAIRMAN. So that the quality of the tea that is used is according to samples that have been furnished by you to the Department?

Mr. SHEA. Yes; They require samples of most everything, especially such things as tea. I do not suppose they would require samples of buckwheat or hominy, but they require samples of coffee and most articles of that kind.

The CHAIRMAN. Have you ever had any trouble with the hospital? Have there ever been any complaints that things have not been up to the standard?

Mr. SHEA. No; never.

The CHAIRMAN. How long have you been selling goods to the hospital?

Mr. SHEA. I suppose fifteen or twenty years. I went over originally a little prejudiced against bidding, for I imagined there might be a good deal of favoritism and it would be risky to take those bids. I

went over to this asylum, I think, in Doctor Richardson's or Doctor Godding's time, and I found their bread was beautiful and the coffee and everything was nice. It looked like it was equal to any food-stuffs that could be furnished.

The CHAIRMAN. Do you sell them flour?

Mr. SHEA. I do not sell them flour. I have bid occasionally, but I did not succeed in getting the contract, in buckwheat flour, and occasionally other things.

The CHAIRMAN. About what does your contract amount to with the hospital?

Mr. SHEA. I suppose probably \$1,000 a month. What I have to say, in reference to putting things too low, is that the bidders are so numerous that they have the advantage of picking the cheapest, and I think three-fourths of the people would not take it at the bids that have been offered. It is merely a speculation. Some men bid because they feel that certain articles are going to be lower before the year is out and that they will make up on their bids, and they bid lower than the present market price. Others are more careful and they do not bid so low.

The CHAIRMAN. That is so in everything where there is bidding.

Mr. SHEA. It would not be the case on a monthly contract, of course, because you could buy what you wanted for a month and furnish what they wanted.

The CHAIRMAN. You think that generally, with the character of goods you supply, a yearly contract is more beneficial to the institution?

Mr. SHEA. It is more beneficial to the institution. Of course, I mean they are particular in getting what they bid on. Of course, there are some institutions that are careless about that, I think, but that is not the case there. I am satisfied they are very particular.

#### TESTIMONY OF J. J. HURLEY.

J. J. HURLEY, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Hurley, are you a resident of Washington?

Mr. HURLEY. I am; yes, sir.

The CHAIRMAN. What is your business, sir?

Mr. HURLEY. I am connected with Galt & Co., flour and feed dealers.

The CHAIRMAN. Does that establishment sell any goods to St. Elizabeth's?

Mr. HURLEY. We furnish flour to the insane asylum; yes, sir.

The CHAIRMAN. Is that done by yearly contract with the Department of the Interior?

Mr. HURLEY. That is done by yearly contract; yes, sir.

The CHAIRMAN. And that contract is awarded after competitive bidding, I suppose?

Mr. HURLEY. Yes, sir.

The CHAIRMAN. How long have you had that contract?

Mr. HURLEY. Off and on, in the neighborhood of thirty years we have been furnishing them flour.

The CHAIRMAN. Away back in Doctor Nichol's time?

Mr. HURLEY. In Doctor Nichol's time, and Doctor Godding's and Doctor Richardson's, Doctor Whitmore's, and under the present Doctor White.

The CHAIRMAN. Do you send samples of flour that you furnish to them?

Mr. HURLEY. We have entered into competition, yes, sir, at the Interior Department, and the best is generally demanded.

The CHAIRMAN. What does your business amount to in the course of a year, or in the course of a month?

Mr. HURLEY. Well, it amounts to twelve or fifteen hundred dollars a month, sir.

The CHAIRMAN. Under this contract, the quantity that you supply varies, I suppose, in accordance with the orders you receive from the hospital?

Mr. HURLEY. Yes, sir.

The CHAIRMAN. You agree to furnish the flour at so much a barrel?

Mr. HURLEY. There is an aggregate amount mentioned, and sometimes the whole quantity is used, and sometimes less; but they very seldom use less. The approximation is very close.

The CHAIRMAN. If you furnished any additional, more than the original contract called for—

Mr. HURLEY. If it were necessary; yes, sir.

The CHAIRMAN (continuing). That is done at the same price?

Mr. HURLEY. The same price. There would be no additional charge.

The CHAIRMAN. Have you ever had any complaints of the flour sent to the asylum?

Mr. HURLEY. I believe only once; because our firm is very conscientious about it, and would only send the highest grade No. 1 flour to the asylum; and in case any was not up to the required standard it would be sent for and exchanged—in case of a change in the season so that the flour might get a little musty. I believe there has only been one occasion in the five or more years we have had the contract.

The CHAIRMAN. How long ago was that?

Mr. HURLEY. It may have been four years ago. I do not think that for two or three years past we have had any complaint at all.

The CHAIRMAN. Have you had a sister in the hospital as a patient?

Mr. HURLEY. I have; yes, sir.

The CHAIRMAN. How long has she been there, sir?

Mr. HURLEY. I think in November, 1895, she was sent there.

The CHAIRMAN. Do you go over there to see her at times?

Mr. HURLEY. I do; once a month.

The CHAIRMAN. What do you think generally as to the care she receives there?

Mr. HURLEY. Well, I do not think that better care could be given her at my own home. The attendants are very careful about her, and she is neat and clean, and everything about the institution that I have noticed on the visitations I make is most exemplary.

The CHAIRMAN. Has she a private room?

Mr. HURLEY. No, sir; she is in a general ward.

The CHAIRMAN. Do you remember what building she is in?

Mr. HURLEY. I think it is the J building. I have had occasion to visit some other acquaintances around through other buildings, and



they are attended with the same degree of care that I have seen administered to my sister. She is always neat and clean and in good shape all the time. I have been permitted to visit her when she has been sick there at times, and in passing through the various wards, before reaching her, in every place I passed, all the patients seemed to be very nice and clean, and kept in nice condition. The nurses were just as nice as they could be to me and every one else that I have ever heard speak of the institution.

The CHAIRMAN. I think that is all.

Mr. HURLEY. I was going to say that I made one or two visits to the kitchen and I was more than pleased to see the condition of the cooking facilities there. It looked like a large hotel, and everything seemed to be in nice shape, and there was a nice flavor from the kitchen. I was invited one Sunday to go through there, not by regular appointment, but I was invited accidentally to go through there, and I must say that everything seemed to be in the nicest shape that I could wish to see it.

The CHAIRMAN. What kitchen did you go through, do you remember?

Mr. HURLEY. It was where they do the cooking.

The CHAIRMAN. There are seven kitchens there, and I wondered whether you remembered which one it was.

Mr. HURLEY. This was the general kitchen. They were cooking pies and meats. It was most delicious to go through there. It would tempt anyone's appetite, almost, to try to pitch in.

#### TESTIMONY OF JOHN A. SHEARER.

JOHN A. SHEARER, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Do you reside here?

Mr. SHEARER. Yes, sir.

The CHAIRMAN. You have a daughter who is a patient in St. Elizabeth's?

Mr. SHEARER. I have, in the M building.

The CHAIRMAN. How long has she been there?

Mr. SHEARER. Three years in November last—three years and seven months, to be exact about it.

The CHAIRMAN. What is the matter with her particularly, do you know?

Mr. SHEARER. She is an epileptic.

The CHAIRMAN. What have you to say in regard to the care she receives there?

Mr. SHEARER. Well, if you will let me go on in a general way I will be as brief as I can and will tell you.

The CHAIRMAN. We will be glad to have you do so.

Mr. SHEARER. I have been visiting there these three years and seven months almost every Sunday, except when I have been away on vacation, and occasionally on holidays. I have nothing but good to say for the institution. My daughter is elegantly treated, and I have become acquainted with the inmates of that particular ward in which she is—the M building—and it is a great pleasure for me always to go there. I found two attendants there, Miss Herbert and Mrs. Dorman, who were fine and elegant attendants, and in fact it looked to me as

though they gave their whole life and soul to this subject. The patients are well cared for, clean, and tidy. I have heard it said by witnesses here—I have seen the evidence—that a couple of patients were allowed to fight, and that the attendants would stand off and look on. That never happened there, never in God's world. I have been in the ward when they didn't know I was there. You might say, "How did that occur?" Well, it happened this way: In the summer time some of the patients are out on the porch and some are on the inside.

Then the nurses or attendants have to take the patients to the bathroom. Some of them are completely helpless, and do not know when they want to attend to the necessary duties of nature, and the nurses have to go to the bathrooms sometimes or there may be a sick patient upstairs. Then when that happens the patients are left alone, and as a rule six or eight of the patients who are perfectly rational and sane, only when they are in an epileptic convulsion, look after the others. I have gone in there and took a chair and sat behind a screen that they have there, and the attendants would not know I was there. I have seen them loving and hugging patients that I would not like to love and hug. I have seen this jacket that they talk so much about. It is nothing more nor less than—it looks like a ladies' shirt waist with the sleeves a little bit longer, and they put it on and lace it up and tie the sleeves to keep the patients from hurting themselves.

There is one patient in particular that I have seen it on many times, and her friends and parents knew that it was put on, and put on to keep her from hurting herself or somebody else. Occasionally she would get a spell, and she would squeal like an Indian and go after one of the other patients, and if she got hold of their hair she would pull it out. If she couldn't get their hair, she would pull her own hair. The jacket was put on for a little while, until she became pacified, and then it was taken off. I do not know that it harmed them any, and it was not much inconvenience, and was done for their own good.

I had a friend there who became insane, from my own department, the Interstate Commerce Commission. He became insane about three years ago, and he died a few weeks ago, and was buried. I visited that man in the Toner building.

The CHAIRMAN. What was his name?

Mr. SHEARER. His name was W. H. Denlinger. He died several weeks ago. Consequently I was in that building often, and I have nothing but good to say of the attendants there. I have never seen any ill treatment or bad treatment. This man went through the different stages of the disease that he had until his death. The doctors expected his death, and said so two years ago. One of those stages was the pugilistic stage. He was going up against everything, you know, and he was a regular pugilist, and occasionally he would run against some strong big fellow who was too much for him and who would knock him down, and he would have a black eye. He was so poisoned against these attendants that he imagined they were filling him full of poison and everything of that kind. He would say that they done it, when I would see him having it himself. They treated him as good as they could. I visited him up to the time of his death, and the last few weeks they did everything to keep the man alive, but he finally died. I have seen the food taken to him, and I have seen him have chicken and tomatoes and potatoes

and things of that kind, and I can not see how a man could be treated any better either as to attendance or food.

I want to come back again to the M building. They talk about broken hips and broken arms. I have seen broken arms and broken hips, and it is a wonder to me that there is not more, but it was not done by attendants by a long shot. One good old lady, 80 years old, fell and broke her arm, and she had hardly gotten rightly over it until she slipped and broke her hip. The floors are very slippery. In fact, I have got to be very careful in walking over them. She broke her hip, and they took her up on that place—I don't know where they took her. Another lady by the name of Fannie Redmond fell a few weeks ago and broke her arm. That is not done by attendants. That is done because they fall. In the M building, those epileptics will fall, and I have seen lots of black eyes. My daughter had a black eye with the others. On Sundays I would see different ones fall and get cut heads. I have seen them get a black eye or a cut head. There are about 38 in that building, and there were two attendants. I believe there are three now. Every now and then you hear one of the patients holler, and the attendants will come up on the run, but they fall to the floor before they can catch them. They go down just like that [indicating]. The result is a cut head or a black eye.

One little girl I saw fall, and she had a tremendous black eye. The next day she came to me and wanted me to say Miss Herbert had hit her and blacked her eye. That was not so. She fell and got her black eye on the floor. After she became rational if anybody said a word against Miss Herbert she would fight for her. She wouldn't believe that she would do such a thing. I don't believe the attendant would hurt anyone. Everything that I have seen was strictly first class, and the attendants have acted in a way that it would be impossible for me to act if I was an attendant there, and was strong enough. They have lots of occasion to tackle them and I couldn't stand it. I have been going there three years and seven months, and I have the first time to see a thing wrong.

I have also been there lately several times in the J building, and there is a class of men there who are insane, chronic. Well, it is the same thing there. It is scrupulously clean, with a polished floor, and the patients are all kept tidy and nice. I have been upstairs in the M building, and upstairs in the Toner building, too, and in the M building especially, and in the R building, and I have yet the first time to see anything but cleanliness and everything in good shape and order. I can not say a bad word about the institution.

The CHAIRMAN. Does that apply to the food as well as to the other things? Does your daughter have proper food?

Mr. SHEARER. My daughter would been dead long ago if she had not been there; and many that are there now, some of whose friends have been complaining about their treatment, would have been dead if they had not been there. It is a great charge. My wife lost her life on account of attending to my daughter. She sacrificed her life. My daughter would have been dead long ago if she had not gone there.

The CHAIRMAN. Did you say that you are in the Interstate Commerce Commission?

Mr. SHEARER. I am.

The CHAIRMAN. What is your position there?

Mr. SHEARER. I am a clerk.

## TESTIMONY OF C. W. TEATES.

C. W. TEATES, having been first duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. Teates, you are an attendant over at St. Elizabeth's?

Mr. TEATES. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. TEATES. Ten years and two months.

The CHAIRMAN. What ward are you in now?

Mr. TEATES. I am in Retreat first, a hospital ward.

The CHAIRMAN. How long have you been in that ward?

Mr. TEATES. About three weeks. We opened it about three weeks ago to-day, I think.

The CHAIRMAN. It is a new ward?

Mr. TEATES. Yes, sir.

The CHAIRMAN. Where were you before that?

Mr. TEATES. I was in B building No. 2, ward No. 2.

The CHAIRMAN. Were you there at the same time Mr. Belt was there?

Mr. TEATES. Yes, sir; Mr. Belt was on my ward. I had charge of the ward.

The CHAIRMAN. You were head attendant, or just one of the attendants?

Mr. TEATES. I had charge of the ward. I was head attendant.

The CHAIRMAN. Did you have charge of the ward when you were with Mr. Belt?

Mr. TEATES. Yes, sir.

The CHAIRMAN. You were Mr. Belt's superior?

Mr. TEATES. Yes, sir.

The CHAIRMAN. Mr. Belt testified that a patient by the name of George Butts, while fighting with one of the attendants, fell and broke his leg, and that he saw you lifting the bed and letting it fall to jar this patient and make him holler.

Mr. TEATES. I never did.

The CHAIRMAN. You never did it?

Mr. TEATES. I positively deny it.

The CHAIRMAN. Do you remember the patient Butts?

Mr. TEATES. I do.

The CHAIRMAN. Do you remember him breaking his leg?

Mr. TEATES. I remember when he had it broken. It was about sometime in the first part of August.

The CHAIRMAN. Of last year?

Mr. TEATES. Yes, sir; 1905.

The CHAIRMAN. How did it happen?

Mr. TEATES. He slipped on the floor. He just ran up against the bed and slipped and fell on the floor and broke his leg, about the 8th of August, and four months after that Mr. Belt came to the institution to work.

The CHAIRMAN. He also says that you would lift this man's broken leg up and make him hollo. Is there any truth in that?

Mr. TEATES. No, sir; I did not.

The CHAIRMAN. Do you know a man by the name of Bruce Allen?

Mr. TEATES. I do. He was on the ward at the time Belt was.

The CHAIRMAN. Is he there now?

Mr. TEATES. Yes, sir.

The CHAIRMAN. Did you ever know of him doing anything of the kind?

Mr. TEATES. No, sir; I never did.

The CHAIRMAN. Mr. Belt also said that he saw you strike a man by the name of Percy Echols.

Mr. TEATES. No, sir.

The CHAIRMAN. And knock him unconscious?

Mr. TEATES. No, sir; I never did.

The CHAIRMAN. Did you ever strike any patient?

Mr. TEATES. No, sir; I always gave them the kindest of treatment.

The CHAIRMAN. When they get fractious how do you restrain them?

Mr. TEATES. Sometimes we use sheets. We tie them with sheets. This man Echols was tied with sheets about four months previous to his death for nearly two weeks, to keep him from hurting himself—injuring himself. He was a very wild kind of a man. He tried to tear his rectum out, I believe. We had to restrain him in that way, with sheets. We tied his feet and hands.

The CHAIRMAN. How often was he relieved? I mean, how often would you take the sheets off to give him exercise?

Mr. TEATES. We would take them off every few hours and rub him down with alcohol, or give him a sponge bath.

The CHAIRMAN. And you say you never, in any way, illtreated Butts or illtreated Echols?

Mr. TEATES. I positively deny ever illtreating them in any way.

The CHAIRMAN. Why did Mr. Belt leave the place, do you know?

Mr. TEATES. I reported him for being asleep and drunk on duty.

The CHAIRMAN. To whom did you make that report?

Mr. TEATES. To Mr. Goddard, the supervisor.

The CHAIRMAN. Was an investigation made in regard to it? Were you questioned about it?

Mr. TEATES. Yes; the supervisors questioned me, and I told them he had been asleep for over an hour in the morning. That was about 6 o'clock, and about 7 o'clock they found him. I saw him a little after 6 o'clock, and as soon as the officer came there I reported to him.

The CHAIRMAN. Where was he?

Mr. TEATES. In the ward B 2.

The CHAIRMAN. Was he lying on the floor or in bed?

Mr. TEATES. No, sir; he was lying on a couch in the parlor.

The CHAIRMAN. Did Belt admit the fact of his being asleep?

Mr. TEATES. Yes; and he asked why I didn't wake him up. I told him that I called him, and after the officers saw him and demanded his keys he took his coat off and wanted to fight.

The CHAIRMAN. This man Belt also said that he saw you take Government property—soap, tobacco, and things of that kind—and take them home with you. Is there any truth in that?

Mr. TEATES. I positively deny that charge.

Mr. HAY. When this man broke his leg, whose ward was he on? Was he on your ward?

Mr. TEATES. Yes, sir.

Mr. HAY. Was that B 2?

Mr. TEATES. B 2; yes, sir.

Mr. HAY. Was any attendant discharged at that time from that ward?

Mr. TEATES. No, sir; none of the attendants were at fault, sir. He was a feeble man, and he slipped himself.

Mr. HAY. A great deal has been said here this morning about people falling down and breaking their legs and hips. Is that caused by the floor being so slippery?

Mr. TEATES. To a certain extent, yes, sir; and he was always a man who would go around the hall and hang his toes in things and stumble.

The CHAIRMAN. Do you think there are enough attendants over there?

Mr. TEATES. No; I think we ought to have more.

The CHAIRMAN. Do you think so because it would benefit the patients, or because it would give the other attendants more time?

Mr. TEATES. It would be a benefit to the patients.

Mr. HAY. In what respect?

Mr. TEATES. It would give them better attention. It would give us more time to wait on them.

Mr. HAY. How many patients did you have on this B 2?

Mr. TEATES. Twenty-six.

Mr. HAY. And 2 attendants?

Mr. TEATES. We had 3 men and 1 lady nurse, sir.

Mr. HAY. That is more than they usually have, is it not?

Mr. TEATES. Yes, sir; that was a hospital ward, with bedridden patients.

Mr. HAY. Were they all bedridden cases?

Mr. TEATES. Yes, sir.

Mr. HAY. How many patients have you on the ward you are on now?

Mr. TEATES. Thirty-eight, and 4 men and 1 girl nurse.

Mr. HAY. What character of patients?

Mr. TEATES. They are bedridden patients.

Mr. HAY. They are all bedridden?

Mr. TEATES. Thirty-five are, and 3 are up and around the hall.

Mr. HAY. Thirty-five of them are confined to bed all the time?

Mr. TEATES. Yes, sir.

The CHAIRMAN. Do those men have to be fed?

Mr. TEATES. A good many. About seven or eight have to be fed, and the rest are able to help themselves at mealtime.

The CHAIRMAN. Are these men able to help themselves when they have to attend to their personal duties?

Mr. TEATES. No, sir; about 32 out of the 35 are helpless in that way, too.

The CHAIRMAN. Can they leave their beds, or do they have to use bedpans?

Mr. TEATES. They do everything right in bed, all their wants in that line.

Mr. HAY. How many attendants do you think ought to be on that ward?

Mr. TEATES. At the present time I think we have enough on that ward. We have four men and one girl, and with the help of a few

patients that help us clean up, etc., we can get along very well on that ward. I don't know anything about the others.

Mr. HAY. How about the food? What have you to say about that?

Mr. TEATES. The food on my ward is very good.

Mr. HAY. Yes; that is a hospital ward?

Mr. TEATES. Yes. The patients get very good food, and our food that we eat on the ward with the patients is very good food. We can not complain.

Mr. HAY. How about the food you had on the ward before?

Mr. TEATES. It was very good. That was a hospital ward also.

Mr. HAY. Do you know anything about the food they get generally out there, outside of what you have been having?

Mr. TEATES. I have heard that it is not so good. I can not tell you much about it.

Mr. HAY. You have had no experience with it?

Mr. TEATES. Not recently; not for the last year.

The CHAIRMAN. Besides the attendants you speak of, there are two men on night duty?

Mr. TEATES. Yes, sir; there are two men on night duty from 8 o'clock until 6 in the morning.

The CHAIRMAN. How often did the doctors come through, not your present ward, but the other one you were on?

Mr. TEATES. Doctor Glasscock came through two times a day and Doctor Stack only once, but sometimes twice or three times, depending on how many we had sick, etc.

The CHAIRMAN. Did that state of affairs exist on Sundays as well as on week days?

Mr. TEATES. We always had a physician there during the day, some time. Sundays they would not come through so often.

The CHAIRMAN. Did you know a man by the name of Colonel Rosecrans, a patient there?

Mr. TEATES. Yes, sir; he died, sir. I was with him when he died.

The CHAIRMAN. He had a stroke of paralysis, did he not?

Mr. TEATES. Yes.

The CHAIRMAN. How long after he had the stroke of paralysis was it before a doctor came to him?

Mr. TEATES. He had the stroke during the night. I do not know exactly what time it was in the night.

The CHAIRMAN. What time did you find him?

Mr. TEATES. At 11 o'clock. He fell out of bed during the night and the night watchman found him.

The CHAIRMAN. Did a doctor see him before you came on duty in the morning?

Mr. TEATES. The night doctor had seen him, I think. I do not know what happens in the night, except from the report.

The CHAIRMAN. Do you know when the day doctor saw him?

Mr. TEATES. Next morning at 9 o'clock, when he came through.

The CHAIRMAN. Belt testified that the day this Colonel Rosecrans had the stroke of paralysis, about 10 o'clock he went down to the dormitory and Mr. Teates was there, and Colonel Rosecrans was going through funny motions with the covers, and that he could not keep them on, and that Mr. Teates said, "Let him alone; he has got a spell on him of some kind and I want to see what fix he will get put in." Is there any truth in that?

Mr. TEATES. No, sir.

The CHAIRMAN. Tell us just when you found Colonel Rosecrans, and what you did?

Mr. TEATES. It was some time during the night, I don't know when, that he had the stroke, and I found him the next morning at 6 o'clock. He was in bed all right, then, except that he had this stroke of paralysis during the night, I suppose.

The CHAIRMAN. Was he very restless?

Mr. TEATES. He was not restless in the morning, but later on he became a little restless. I stayed right alongside of the bed and watched him and took care of him until he was moved up in another room, and then the doctor prescribed some medicine for him, and we gave them to him and took care of him until he died, the best we could.

The CHAIRMAN. Did he die that day?

Mr. TEATES. No; he died about three days afterwards, I think.

The CHAIRMAN. Did you help move him upstairs?

Mr. TEATES. He was moved into a different part of the ward, not upstairs. He was moved into a different room, and I helped to carry him; yes.

The CHAIRMAN. What was the names of the supervisors on that ward?

Mr. TEATES. The supervisors were Mr. Burch and Mr. Goddard.

The CHAIRMAN. Who were the other attendants?

Mr. TEATES. Allen and myself.

The CHAIRMAN. Belt was there?

Mr. TEATES. Belt, yes; and Mrs. McLaughlin, the female nurse.

The CHAIRMAN. Who is the supervisor of the ward you are on now?

Mr. TEATES. There are Mr. Maloney, Mr. Goddard, and Mr. Burch—the same ones. It is in the same department.

The CHAIRMAN. What is the name of the second woman there?

Mr. TEATES. Miss Morton.

Mr. HAY. What have you to say as to the time you have to be there on duty?

Mr. TEATES. I think the hours are rather long. A person becomes tired after fourteen hours, or before the fourteen hours are up, with the work we have to do. I have to work very hard, and it requires a good deal of thought and is very exacting work.

Mr. HAY. What have you to say as to the class of people who are employed there, when they come on duty at first?

Mr. TEATES. Some of them are good and some of them are not very good and do not get much better.

Mr. HAY. They do not get much better?

Mr. TEATES. They do not seem to care. They have no cares on them, and do not care whether they treat the patients badly or not, just so they get through the day some way or another. They never think about their patients from morning till night, scarcely, but just do a certain routine of work.

Mr. HAY. Are you speaking of the attendants generally around the hospital, or just those who have come under your observation?

Mr. TEATES. Just those that have come under my observation.

Mr. HAY. Who are they?

Mr. TEATES. Well, there is a couple of young men and



who have only been there a few weeks now. They may improve; I don't know.

Mr. HAY. How old are they? Do you know?

Mr. TEATES. I judge about 28, or 25 possibly.

Mr. HAY. You say they do not seem to care about what they do so they get through their work

Mr. TEATES. No, sir; they do not seem to be conscientious about the work at all.

Mr. HAY. Do you attribute that to the fact that they do not receive sufficient pay, or to what?

Mr. TEATES. Well, I suppose that is the cause. They do not care for the position, possibly.

Mr. HAY. Do you think it feasible to have a class of attendants employed there who have had experience in other institutions and who would give all their time and care to the patients?

Mr. TEATES. It would be a great deal better if we had that kind of attendants; yes.

Mr. HAY. How much more would that cost? How much are you paid, for instance?

Mr. TEATES. I get \$42.50 a month.

Mr. HAY. How long have you had to be there in order to receive \$42.50?

Mr. TEATES. I got the last raise, I think, last January a year ago.

Mr. HAY. And you say you have been there how many years?

Mr. TEATES. Ten years and two months.

Mr. HAY. When you first went there you got \$18?

Mr. TEATES. Eighteen dollars; yes, sir.

Mr. HAY. And after being there a year you got what?

Mr. TEATES. I was raised to \$20 after six months, and then after the year was up I got \$25, and \$5 every year until I got to \$35, and then after three of four years I got the other raises to \$42.50.

Mr. HAY. It has been testified here that an attendant would get the highest price after being there two years and six months. Is that so? Have you ever heard of anybody doing that?

Mr. TEATES. No; I think it would take longer than that. I have not figured out exactly how long it would take. They only raise, I think, \$2.50 every six months.

Mr. HAY. And you went in at \$18?

Mr. TEATES. I started in at \$18.

Mr. HAY. It is an easy calculation to make. I have no further questions.

The CHAIRMAN. Were there ever any charges made against Burch there, Mr. Teates?

Mr. TEATES. Not to my knowledge.

The CHAIRMAN. Did you ever hear of Burch flogging patients?

Mr. TEATES. No, sir; I never did.

The CHAIRMAN. Did you ever hear of Burch telling this man Belt to belt patients?

Mr. TEATES. No, sir.

The CHAIRMAN. No; that was Ball. Did you ever hear of him telling Ball to strap patients?

Mr. TEATES. No, sir; I never did.

The CHAIRMAN. Did you ever hear of any such thing having been done?

Mr. TEATES. No, sir.

The CHAIRMAN. What would have happened to a man who flogged patients?

Mr. TEATES. I don't know. I wouldn't like to be the man.

The CHAIRMAN. Did you ever have any orders given you to clean up the patients and get them out on board of visitors' days?

Mr. TEATES. No, sir.

The CHAIRMAN. Was there any difference on board of visitors' days from what there was any other day, about taking patients out?

Mr. TEATES. No; I have never made any difference in the last two or three years. We used to have a little extra cleaning on board days a good many years ago, but not for the last few years.

The CHAIRMAN. You say you do not have that now?

Mr. TEATES. No, sir.

The CHAIRMAN. How often do you take the patients out—oh, your patients are bedridden.

Mr. TEATES. On my ward I never take them out, except one or two.

Mr. HAY. How often does the board come through your ward?

Mr. TEATES. I do not know. I have not seen them for so long.

Mr. HAY. You have not seen them for so long that you do not remember?

Mr. TEATES. No, sir.

Mr. HAY. How often does Doctor White come through the ward?

Mr. TEATES. Doctor White has been through my ward four times in the last year.

Mr. HAY. Was that on Sunday?

Mr. TEATES. It was three times on Sunday and once was during the week. A week or so ago he came through the ward.

Mr. HAY. You say that some of the attendants are careless and do not give proper attention to the inmates. In what respect are they careless?

Mr. TEATES. They are careless in this way. They do not seem to care whether they treat the patients right or do not. I do not say that they cruelly treat them, but they don't treat them at all. They just leave them go.

Mr. HAY. They neglect them?

Mr. TEATES. They neglect them; yes, sir.

The CHAIRMAN. Did you ever make complaint against any attendant for neglect of a patient?

Mr. TEATES. Oh, yes, sir.

The CHAIRMAN. To the doctor in charge of your ward?

Mr. TEATES. Yes, sir.

The CHAIRMAN. What is done when you make a complaint of that kind?

Mr. TEATES. They usually transfer them and try them in another ward. Sometimes they do better when they are transferred to another ward.

The CHAIRMAN. Have you had occasion to complain of any attendant who has been there for a number of years for any such thing as that?

Mr. TEATES. No, sir.

The CHAIRMAN. The complaints are as to the new fellows coming in?

Mr. TEATES. Yes, sir; the new boys coming in!

The CHAIRMAN. They are green hands who do not know their duties very well. Is that it?

Mr. TEATES. Well, the greener they are the better, it seems like. Those who come right from the country seem to be better than others, because they are willing to learn; but some of the boys who have learned the work previously do not care to take up the work again.

Mr. HAY. They have been there before and have returned?

Mr. TEATES. Yes.

The CHAIRMAN. When you see such a case you report it to the doctor?

Mr. TEATES. Yes, sir.

The CHAIRMAN. And you believe that the doctor investigates it?

Mr. TEATES. Yes, sir.

The CHAIRMAN. He does something about it, anyway?

Mr. TEATES. Yes, sir.

The CHAIRMAN. The doctors are attentive to their duty on the ward, are they?

Mr. TEATES. Yes, sir.

Mr. HAY. Do you not think that an attendant ought to be discharged for neglect almost as quickly as if he had treated a patient cruelly?

Mr. TEATES. Yes, sir; for any serious neglect. Of course sometimes they neglect their work.

Mr. HAY. Neglect is cruelty, is it not?

Mr. TEATES. Yes, sir; to a certain extent.

#### TESTIMONY OF DR. G. H. SCHWINN.

Dr. G. H. SCHWINN, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. Doctor, you are in St. Elizabeth's now?

Doctor SCHWINN. Yes, sir.

The CHAIRMAN. How long have you been there?

Doctor SCHWINN. I have been there since July 3, 1898.

The CHAIRMAN. Did you go there immediately upon graduating from a medical school?

Doctor SCHWINN. Yes, sir.

The CHAIRMAN. Where did you study medicine?

Doctor SCHWINN. I studied at Columbian University, which is now known as the George Washington University.

The CHAIRMAN. What ward have you charge of now?

Doctor SCHWINN. At the present time I have charge of what is known as the Howard Hall department.

The CHAIRMAN. That is the criminal department?

Doctor SCHWINN. That is the criminal department and also the colored insane, the males.

The CHAIRMAN. There has been some testimony here by a man by the name of Douglass and a man by the name of Lacey, relative to the treatment of a patient named Samuel A. Tyler. What do you know about that case?

Doctor SCHWINN. I remember the case very well.

The CHAIRMAN. When did it happen?

Doctor SCHWINN. I do not know the exact time.

The CHAIRMAN. Can you give it approximately?

Doctor SCHWINN. I could only make a rough guess. It has been about a year ago. He is a paretic, and at times has been very much disturbed, constantly, night and day. He has frequently battered himself by taking his closed hand and hitting himself in the face. He has thrown himself around the room and on the floor, and he has had blackened eyes a number of times. Those blackened eyes were sustained in that way, by throwing himself around, by hitting himself in the face, and knocking his head against the floor. I have seen that at night. I was on night duty at the time, and I have seen him do that. He also had one wrist bandaged at one time, but that was on account of an abscess, a boil. That was a very troublesome case. He was disturbed frequently, for a couple of weeks at a time, without any let-up, night and day.

The CHAIRMAN. Did he die?

Doctor SCHWINN. No, sir; he is there with us. At present he is very quiet and has not given us any trouble for the past six months. He has not been troublesome at all.

The CHAIRMAN. Did you ever have occasion to order him restrained by mechanical means?

Doctor SCHWINN. No, sir; I do not recall it.

The CHAIRMAN. How did you restrain this man in case of necessity?

Doctor SCHWINN. I do not recall just what mechanical restraint was used. He has been frequently confined to a room without any restraint—just within the confine of the room—but I think there were times when he was restrained.

The CHAIRMAN. You mean by means of the camisole?

Doctor SCHWINN. I do not know whether he was restrained by the camisole or whether it was just the wristlets.

The CHAIRMAN. You believe, then, that all the bruises that have been talked about that this man had came in the way you have mentioned, by throwing himself around and hitting himself?

Doctor SCHWINN. I am pretty positive.

The CHAIRMAN. You do not think any attendant ever hit him?

Doctor SCHWINN. I think not. He is a very large man, a man weighing, I suppose, between 185 and 190 pounds, a six-footer, and a pretty hard man to manage. Before he was transferred to the building where he is now he was what we call "across the road"—in the Richardson group of buildings, temporarily. The last one of those spells he had he broke out just 13 of those large panes of glass, and they are very large panes of glass, too, fully 3 feet by 2 feet, and over, I guess. He broke out 13 of those before they could stop him, and he knocked down one or two attendants and they had quite a time with him. He was transferred from there and went to the Howard Hall department. I was not in charge of the hall at that time.

The CHAIRMAN. Where did he come from to the asylum; do you know?

Doctor SCHWINN. I think he came from the District. I may be wrong. I have a slight impression that perhaps he was a soldier, and he may have come through the military authorities. I am not sure of that.

Mr. HAY. Doctor, do you know Mr. Maenche?

Doctor SCHWINN. Yes, sir.

Mr. HAY. Was he ever reported to you at any time for being drunk?

Doctor SCHWINN. As being drunk?

Mr. HAY. Yes.

Doctor SCHWINN. Not to my knowledge.

Mr. HAY. Or for any other delinquency?

Doctor SCHWINN. Not to my knowledge; no, sir.

Mr. HAY. You can testify, can you not, as to the separation of the criminal insane from the others? How is that done?

Doctor SCHWINN. Well, we have this special building, this Howard Hall department, but the people there are not all criminal. We have those who have charges against them, but we also have those who are vicious, with criminal tendencies. We separate them from the other class of patients. They are naturally of the same class as the criminals. It is true they have no crime charged against them, but if they were at large they soon would have.

Mr. HAY. You mean that if an insane man has a criminal tendency he is liable, like this man Tyler, of whom you have just been speaking, to break out?

Doctor SCHWINN. Yes, sir.

Mr. HAY. Would it not be well to have some other place to put those men, and not to put them with the criminal insane?

Doctor SCHWINN. It might be well, perhaps, to do that, but I do not see any great objection to putting them together. They certainly are comfortably situated there. They have single rooms, and they have every advantage there, I should think. Besides, these cases are not kept there permanently. That is only a temporary arrangement. We frequently make transfers from that department. These disturbed spells do not continue indefinitely; they subside.

Mr. HAY. When you send a man of that character there, you only send him there until he gets over his disturbed spell?

Doctor SCHWINN. Yes; and at some future time he is transferred out of there if he has not any charges against him. Because a man goes there is no indication that he will stay there permanently.

Mr. HAY. Have you ever transferred any criminal insane to any other part of the institution?

Doctor SCHWINN. We do not; no, sir.

Mr. HAY. Are there any criminal insane, so far as you know, in any other department of the hospital except in Howard Hall?

Doctor SCHWINN. There are not, with the exception, perhaps, of the females. Of course, we haven't any provision for females there.

Mr. HAY. I am speaking of males. You have no separate ward or separate building for the female criminal insane?

Doctor SCHWINN. We have not. There are a very few of them there.

Mr. HAY. Do these criminal insane people receive the same treatment and the same food, and so on, as all of the inmates of the institution?

Doctor SCHWINN. There is no difference at all. They receive the same care and attention and the same food.

Mr. HAY. Do they get exercise? Do you take them out?

Doctor SCHWINN. There are a few who at different times go out

and walk around the grounds, when we have sufficient attendants to spare. Then, you may have seen the court there. They are out in that court every morning from 9 o'clock until a quarter of 12, and in the afternoon again until about a quarter to 4.

Mr. HAY. Some of the criminal insane you could not take out safely, I suppose?

Doctor SCHWINN. No. Well, we have some long-sentence men there, and some men who, if we think it is advisable, we allow to go out.

Mr. HAY. You do not mean on parole?

Doctor SCHWINN. Oh no; only accompanied by attendants. We never let anybody out of there unless accompanied by an attendant.

Mr. HAY. How about the food?

Doctor SCHWINN. The food I consider very good. I frequently see it myself. I go through the dining rooms and I see the food served, and I can also testify as to the quality of it. It is very good.

Mr. HAY. Doctor, is the food for Howard Hall cooked in the general kitchen?

Doctor SCHWINN. It is cooked in the general kitchen.

Mr. HAY. You have no separate kitchen for Howard Hall?

Doctor SCHWINN. No, sir.

Mr. HAY. How many people have you in Howard Hall?

Doctor SCHWINN. We have 137.

Mr. HAY. Would it not be better to have the food cooked at that place?

Doctor SCHWINN. I do not know that it would make very much difference. We are pretty close to the general kitchen.

Mr. HAY. You are?

Doctor SCHWINN. Yes; it is only a very short distance.

Mr. HAY. How many attendants have you in Howard Hall?

Doctor SCHWINN. We have two assigned to each ward. Then we have a man in each dining room. We have 8 wards there. That would be 18 men there in the hall.

Mr. HAY. Outside of the supervisors?

Doctor SCHWINN. Yes, sir; not including the supervisors or the men on night duty.

Mr. HAY. What character of clothing do these men have?

Doctor SCHWINN. I consider the clothing very good. Each man has at least two outer suits, and they have anywhere from two to three suits of underwear, every man. They are well provided with clothing.

Mr. HAY. I will ask you about two marines who were sent to Howard Hall. Do you know anything about that?

Doctor SCHWINN. Only that they had been creating a disturbance for quite a time. One of them had made some threats against Doctor Logie, I think, and had attempted to strike him; and the other man, by the name of George Broadbent, was on Gray Ash. He is pretty vicious at times. He struck a man there and blacked his eye and one thing and another very badly. He would always await his chance to do that. He would wait until the attendants got in some other part of the ward and he would lay for his man, if it took a week to do it, and then he would strike out. They are suitable cases for the hall, I think. Since we have had them they have been very good patients, indeed, and get along very well, and I think it will be

only a short time, perhaps, before we will be able to transfer them back to their department.

The CHAIRMAN. Mr. Evans desires to make a statement.

Mr. EVANS. In the testimony of Doctor White he stated that the discharge of Mr. Thornton O. Pyles was due to some trouble of his mind, and there has also a letter been filed which purports to have been addressed by Doctor White to the chairman of the board of visitors setting forth the same trouble in rather an indefinite way. In order to rebut that we had subpoenaed Drs. R. A. Pyles, Chester Pyles, and John L. Warren, and Mr. George Hardy, treasurer of St. George County, and Judge J. M. Roberts whom we desire to question upon the condition of Mr. Pyles's mind in 1904, at the time of his discharge, prior thereto, and since that time. The committee, however, decided that it was not necessary to—

The CHAIRMAN. Wait a moment. I will speak for the committee. The committee determined that it was not necessary to hear those witnesses, because the question of the sanity or insanity of Mr. Thornton O. Pyles was not under consideration in the opinion of the committee.

(The committee at 12 o'clock m. adjourned until to-morrow, Friday, June 15, 1906, at 10 o'clock a. m.)

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HOUSE OF REPRESENTATIVES,  
*Washington, D. C., June 15, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Smyser (acting chairman), Hay, and Wallace; also Mr. Evans, Doctor Emmons, Mr. Fenning, and others.

The correspondence referred to by Richard P. Evans, on page 2760 of the record, is as follows:

GOVERNMENT HOSPITAL FOR THE INSANE,  
*Washington, D. C., February 21, 1906.*

RICHARD P. EVANS,

*1403 New York Avenue, Washington, D. C.*

DEAR SIR: The president of the board of visitors of the hospital directs me to inform you that there will be a meeting of the board held in the administration building at 10 a. m., Saturday, the 24th instant.

You are requested to be present at that time to give evidence touching certain statements which have recently appeared in the public press over your signature.

Very respectfully,

WILLIAM A. WHITE, *Secretary.*

The reply to this letter was as follows:

WASHINGTON, D. C., *February 23, 1906.*

WILLIAM A. WHITE, M. D.,

*Secretary Board of Visitors, Government Hospital for the Insane.*

DEAR SIR: Replying to your two letters of the 21st instant, addressed to Dr. Charles M. Emmons and myself, requesting our appearance before your board of visitors at the administration building on Saturday, 24th instant, at 10 a. m., to give evidence relative to subject-matter of our report as a committee of the Medico-Legal Society of the District of Columbia (Incorporated), I have to state, as attorney for the society, that, exclusive of other reasons, we would not be justified in participating in any inquiry by your board pending action upon the resolution now under consideration providing for such investigation by a committee of the House of Representatives. This would be forestalling the action of Congress.

In this connection I beg leave to ask whether the board of visitors has considered the apparent impropriety of conducting this investigation, in the course of which the secretary and other members of the board will be called upon to testify and in the result of which each member has a deep personal interest. Your board in arriving at a decision would necessarily have to pass judgment upon its own testimony and upon its own past official acts. The delicacy of the situation would be pronounced.

Under separate cover I mail you copies of the committee's report, which will be presented to the Secretary of the Interior to-day.

Very respectfully,

RICHARD P. EVANS, *Attorney.*

#### TESTIMONY OF MRS. MARIE J. MILLS.

Mrs. MARIE J. MILLS, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mrs. MILLS. Marie J. Mills.

The ACTING CHAIRMAN. Are you employed at or connected in any way with the Government Hospital for the Insane?

Mrs. MILLS. No, sir.

The ACTING CHAIRMAN. Do you visit there?

Mrs. MILLS. Yes, sir.

The ACTING CHAIRMAN. What takes you to the hospital?

Mrs. MILLS. At present, just an interest in some of the patients; but my husband was a patient there for two years and I went pretty steady to see him.

The ACTING CHAIRMAN. When was he a patient?

Mrs. MILLS. From the 1st of April, 1903, to June 12, 1905.

The ACTING CHAIRMAN. What ward was he in?

Mrs. MILLS. He was in Poplar ward at first.

The ACTING CHAIRMAN. How frequently did you go to see him during that time?

Mrs. MILLS. Sometimes I would go almost every day; sometimes two or three times a week.

The ACTING CHAIRMAN. Was he discharged?

Mrs. MILLS. No; he died.

The ACTING CHAIRMAN. He died there?

Mrs. MILLS. Yes, sir.

The ACTING CHAIRMAN. What times of the day would you go and how long would you stay?

Mrs. MILLS. I have been as early as 8 o'clock in the morning—all hours; no special time. I have been as late as 8 o'clock in the evening and stayed until 9.

The ACTING CHAIRMAN. How was your husband treated?

Mrs. MILLS. I think he was treated with the utmost care and consideration.

The ACTING CHAIRMAN. From what you could observe, how were other patients treated?

Mrs. MILLS. I saw nothing but what was perfectly all right.

The ACTING CHAIRMAN. Do you mean in answering that way to cover the whole of your husband's stay there?

Mrs. MILLS. Yes, sir; the time I have been there since he died and while he was there.

The ACTING CHAIRMAN. Since his death, how frequently do you go?



Mrs. MILLS. I suppose I have been about five or six times.

The ACTING CHAIRMAN. During all this time what did you see, if anything, in the nature of cruel treatment toward the patients?

Mrs. MILLS. I didn't see anything at all. I have been in the different wards there where there were sick patients, and I didn't see anything at all.

The ACTING CHAIRMAN. Would you go unannounced? Did they know you were coming or not?

Mrs. MILLS. No; they didn't know I was coming.

The ACTING CHAIRMAN. Do you know anything about the food?

Mrs. MILLS. From what I could see the food was very good, and my husband often said he wished that I and my little boy were with him to share his good meals. My husband went there a very sick man, under Doctor Richardson. Doctor Richardson said that he might possibly live two years with care. He lived two years and two months.

Mr. WALLACE. What time did your husband die?

Mrs. MILLS. He died June 12, 1905.

Mr. WALLACE. You say you have made five or six visits out there since?

Mrs. MILLS. Yes, sir; maybe more. Whenever I feel like going, I go there. They were always very nice to me—the doctors, patients, and all of them—so that I feel I can go there whenever I like to.

Mr. HAY. The ward your husband was on was a parole ward, was it not?

Mrs. MILLS. Sir?

Mr. HAY. This ward your husband was on when he first went there was a parole ward, was it not?

Mrs. MILLS. Yes; he could go out when he felt like it, and whenever he was able I used to go and get him and take him home.

Mr. HAY. They had very few on that ward, did they not?

Mrs. MILLS. No; the ward was pretty full, always.

Mr. HAY. How many?

Mrs. MILLS. I think the average is about fourteen, or more.

Mr. HAY. After he went away from that ward where did he go?

Mrs. MILLS. He went to the hospital ward. He was very sick, and the doctor thought he would be better attended to there.

The ACTING CHAIRMAN. Did you visit him in the hospital ward?

Mrs. MILLS. Yes, sir.

#### TESTIMONY OF DR. W. F. HEMLER.

Dr. W. F. HEMLER, being duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Doctor HEMLER. William F. Hemler.

The ACTING CHAIRMAN. What is your business?

Doctor HEMLER. I am a physician, employed at the health office of the District.

The ACTING CHAIRMAN. Here in the city?

Doctor HEMLER. Yes, sir.

The ACTING CHAIRMAN. How long have you been so employed?

Doctor HEMLER. Ever since July 12, 1905.

The ACTING CHAIRMAN. And prior to that?

Doctor HELMER. I was an interne at the Government Hospital for the Insane since June 14, 1904.

The ACTING CHAIRMAN. St. Elizabeth's?

Doctor HELMER. Yes, sir.

The ACTING CHAIRMAN. And as interne, what were your duties and where did they take you?

Doctor HELMER. My duties were to assist the assistant physician in charge of the department.

The ACTING CHAIRMAN. Who was he?

Doctor HELMER. Doctor Logie.

The ACTING CHAIRMAN. Were you with him all the time you were an interne?

Doctor HELMER. All except about one month.

The ACTING CHAIRMAN. Who were you with then?

Doctor HELMER. Or a little more than a month. I was with Doctor Toner for about a month, then for about sixteen days I was on night duty.

The ACTING CHAIRMAN. Now go on and describe in your own way where your duties took you and what you observed.

Doctor HELMER. When I was with Doctor Logie we went around every morning, very often together, and sometimes we took separate parts of the institution.

We visited every part of the wards and spoke to the patients and observed the different patients, and anything that needed attention we attended to right there. Usually during the day I would make at least one more trip through the whole of that part of the institution, and I understand—at least, I believe—that Doctor Logie also made one more trip through, so that during the day there were at least three visits to the whole of that part of the institution, made either by Doctor Logie or myself. I never observed anything during those visits. I never observed any cruelty.

The ACTING CHAIRMAN. First, now, what do you say, during the time you were there with Doctor Logie or Doctor Toner, as to the care given by the physicians to the patients in charge?

Doctor HELMER. I don't know of any way that they could be better cared for. I think the care was as good as could be given.

The ACTING CHAIRMAN. Was there any neglect on the part of the physicians?

Doctor HELMER. No, sir; I never observed any neglect whatsoever.

The ACTING CHAIRMAN. What was the care of the patients from the nurses and attendants?

Doctor HELMER. All the nurses and attendants were very careful. I never noticed any lack of care whatsoever.

The ACTING CHAIRMAN. Did you observe any cruelty at any time?

Doctor HELMER. No, sir; I never observed any cruelty.

The ACTING CHAIRMAN. Did any come to your knowledge?

Doctor HELMER. There were several complaints made, but I have never been able to confirm them. One case a complaint was made about an attendant who had struck a patient, and we didn't see it and none of the other attendants did. We investigated the matter, and several patients testified that they saw this attendant strike the patient, and he was discharged.

The ACTING CHAIRMAN. Do you know who the attendant was?

Doctor HEMLER. I think his name was Hill.

The CHAIRMAN. I want to get the fact in the record. As against Mr. Hill, by way of testimony, the testimony came from patients confined and—

Doctor HEMLER. Yes, sir.

The ACTING CHAIRMAN. And notwithstanding that he was discharged upon that accusation of cruelty?

Doctor HEMLER. I don't know that it was an accusation of cruelty. It was a charge that he struck this patient. They got into a scuffle somehow or other and they were both down, from what I understand. I don't know whether the patient attacked Mr. Hill or not, but they were both down on the floor, and several patients there said they saw him strike him, and the patient himself said he struck him. The other attendant on the ward said he didn't see it and a number of the other patients said they didn't see it. I don't know whether you could call it cruelty or not.

The ACTING CHAIRMAN. The result of the conduct of the attendant was that it resulted in his discharge?

Doctor HEMLER. Yes, sir.

The CHAIRMAN. How was the food?

Doctor HEMLER. I think the food was very good.

The ACTING CHAIRMAN. Did you ever examine it to see?

Doctor HEMLER. Yes, sir; I frequently went into the dining room to see it.

The ACTING CHAIRMAN. Give us, briefly, some idea of the inspection of the food that you made.

Doctor HEMLER. I would go in when they were giving the food out to the patients and I would look at it. I never tasted any of the food that was given to the patients. I did, however, eat with the attendants several times—a number of times—and that food was very good.

The ACTING CHAIRMAN. Did you have the same food as the patients?

Doctor HEMLER. You mean when I ate with the attendants?

The ACTING CHAIRMAN. Generally.

Doctor HEMLER. No; we didn't get the same food as the patients.

The ACTING CHAIRMAN. Was it better or worse, or the same thing?

Doctor HEMLER. We got more of it. I don't know whether it was any better or worse. We got a greater variety, I should say.

The ACTING CHAIRMAN. Do you know of any deeds of restraint there?

Doctor HEMLER. Yes, sir.

The ACTING CHAIRMAN. What were they, briefly? I do not ask you to describe them.

Doctor HEMLER. If a patient in bed was very restless sometimes, and if he was inclined to get out of bed and fall around and hurt himself, we would tie him down with a sheet. Some of the patients were very destructive. They wouldn't keep any of their clothing on them, and they would have cuffs put on them, or if they were very excited they would put cuffs on them.

The ACTING CHAIRMAN. What would you say as to the effect of that upon the patient?

Doctor HEMLER. I don't see how they could possibly be treated without this restraint, to the extent that it was carried on. It is never used except it is absolutely necessary.

The ACTING CHAIRMAN. Did you ever witness an instance there where any means of restraint was resorted to for improper purposes?

Doctor HEMLER. No, sir.

The ACTING CHAIRMAN. How frequently since you were an interne have you visited the institution?

Doctor HEMLER. I should say probably seven or eight times—

The ACTING CHAIRMAN. Were your visits merely casual or did you observe something there? How was it?

Doctor HEMLER. I was in a position to observe anything in the part of the institution through which I went, but I didn't go through the whole institution.

The ACTING CHAIRMAN. In the parts through which you did go, how was it?

Doctor HEMLER. It was just as good as it had been previously. I never noticed anything since that would be different.

The ACTING CHAIRMAN. Did you know a Mrs. Washburn?

Doctor HEMLER. I don't remember Mrs. Washburn. I knew Dwight H. Washburn, I think his name was. He was a patient there.

The ACTING CHAIRMAN. Do you know of his being tied to the bed?

Doctor HEMLER. No, sir; I don't remember distinctly in his case. As a rule he was not. He may have at some particular time, but while I was there he was around the wards most of the time.

(At this point the chairman took the chair.)

#### TESTIMONY OF B. FRANK WRIGHT.

B. FRANK WRIGHT, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Wright, what is your business?

Mr. WRIGHT. Undertaker.

The CHAIRMAN. Here in the city of Washington?

Mr. WRIGHT. Yes, sir.

The CHAIRMAN. Does your firm bury people who die at St. Elizabeth's Hospital?

Mr. WRIGHT. We only bury them where some outsider comes there and engages us; not for the hospital.

The CHAIRMAN. You do not do any work for the hospital?

Mr. WRIGHT. No, sir.

The CHAIRMAN. It is merely when friends of people who die there employ you that you do it?

Mr. WRIGHT. When they employ us; yes, sir.

The CHAIRMAN. How many people do you bury from the hospital?

Mr. WRIGHT. That is pretty hard to say.

The CHAIRMAN. Do you go once a week or once a month?

Mr. WRIGHT. Sometimes once a week or twice a week, and then maybe not for a month. We average about 15 cases a year. Just last night I took the book and went over it, and I think we had last year about 12 or 13 cases—something like that.

The CHAIRMAN. Do you ever have charge of any bodies where autopsies have been performed?

**Mr. WRIGHT.** Once in a while we get them that way, but not many like that.

**The CHAIRMAN.** Generally speaking, what is the condition of the bodies that you take from St. Elizabeth's?

**Mr. WRIGHT.** All the bodies I have got from there they have always been washed and underclothes put on them. If they are gentlemen, they have always been shaved. I never received bodies from any institution in any better shape than I do from there.

**The CHAIRMAN.** I will ask you this, Do you receive bodies from other institutions here in Washington sometimes?

**Mr. WRIGHT.** I get bodies from all the different hospitals.

**The CHAIRMAN.** You say the condition of the bodies from St. Elizabeth's is—

**Mr. WRIGHT.** Just as good as any of them. They are always washed and clean and a clean suit of underclothes; and then, I say, if it is a gentleman, he is always shaved.

**Mr. SMYSER.** So there is no complaint over the dead?

**Mr. WRIGHT.** As far as I am concerned, I wish they would all fix them as good as they do over there. It would be lots easier for the undertaker, because sometimes those bodies remain twelve or fifteen hours, or maybe longer than that. What I mean is, after a body dies in a hospital, sometimes they are kept there for ten or twelve hours; and if they are not washed and fixed nice in the first place, that goes a lot against them.

#### TESTIMONY OF DR. GEORGE T. VAUGHAN.

**Dr. GEORGE T. VAUGHAN,** being first duly sworn, was examined and testified as follows:

**The CHAIRMAN.** Doctor, are you a practicing physician here in the city of Washington?

**Doctor VAUGHAN.** Yes, sir.

**The CHAIRMAN.** How long have you been practicing medicine?

**Doctor VAUGHAN.** Twenty-six years.

**The CHAIRMAN.** Here all the time?

**Doctor VAUGHAN.** No; I have been here about twelve years altogether.

**The CHAIRMAN.** Do your professional duties take you to St. Elizabeth's frequently?

**Doctor VAUGHAN.** Quite frequently.

**The CHAIRMAN.** About how often?

**Doctor VAUGHAN.** I am one of the consulting surgeons, and I am on duty three months in the year. One time I was on duty about a year, I think. They called on me throughout that year.

**The CHAIRMAN.** That is a purely honorary position, is it not?

**Doctor VAUGHAN.** No; I operate a good deal over there. It is honorary in respect to getting compensation.

**The CHAIRMAN.** The compensation is what I mean.

**Doctor VAUGHAN.** Yes, sir.

**The CHAIRMAN.** I mean you get no compensation for performing operations there?

**Doctor VAUGHAN.** That is it—usually.

The CHAIRMAN. What is your experience with regard to patients that you are interested in or operate upon?

Doctor VAUGHAN. They have always been taken the best of care of. All the patients I have treated have certainly been attended as well as they have been attended in any other hospital with which I have been connected, and I have been connected with a great many in my experience.

The CHAIRMAN. Are the facilities for performing the operations satisfactory over at St. Elizabeth's?

Doctor VAUGHAN. Perfectly; they could not be surpassed, I think, at present.

The CHAIRMAN. What about the medical staff; do they aid you in any way that you desire them to?

Doctor VAUGHAN. Oh, yes.

The CHAIRMAN. And does that apply also to the attendants and nurses?

Doctor VAUGHAN. As far as I have seen it, it certainly does.

The CHAIRMAN. After you have performed operations upon patients, do you go back and visit these same patients, to see how they are getting along?

Doctor VAUGHAN. As often as is necessary.

The CHAIRMAN. Have you found in cases of that kind that the treatment accorded to the patients was satisfactory—I mean the treatment that was given by the nurses and attendants?

Doctor VAUGHAN. Yes, sir; perfectly satisfactory.

The CHAIRMAN. Have your directions been properly carried out?

Doctor VAUGHAN. Perfectly.

The CHAIRMAN. Do you know anything at all about the food of the institution; have you had any occasion to examine that?

Doctor VAUGHAN. No; I have not. I have taken a few meals over there myself, by the courtesy of some of the staff, and that is about the only means I have had of judging. I found it all right then.

The CHAIRMAN. Of course the people who are operated upon have a special diet?

Doctor VAUGHAN. Yes; and that has always been carried out in a satisfactory way—perfectly.

Mr. SMYSER. What institutions did you have experience in?

Doctor VAUGHAN. I was in the Marine-Hospital Service for eighteen years, and I was connected with most of the marine hospitals in the United States, I think. Besides that, I am connected with several other hospitals here in this city. I am surgeon in chief of Georgetown University Hospital, attending surgeon to the Emergency Hospital, I visit at times Providence Hospital, Garfield Hospital, George Washington University Hospital—in fact, all the hospitals in this city.

Mr. SMYSER. What do you say, doctor, as to the St. Elizabeth's Hospital in its conduct and management as compared with the others you have named?

Doctor VAUGHAN. I think it is the equal of any of them, fully.

Mr. SMYSER. What is the State of your nativity?

Doctor VAUGHAN. Virginia.

Mr. HAY. Doctor, in the Marine Hospital Service, what is the character of the inspection which they give in their service in the institutions under their control?

Doctor VAUGHAN. You mean the general inspection?

Mr. HAY. Yes.

Doctor VAUGHAN. The rule is to make an inspection once a week, either the officer in charge or in command, as you choose to call it, the chief medical officer, or some one he may designate goes around over the whole institution and inspects everything once a week.

Mr. HAY. Do they have any other inspection?

Doctor VAUGHAN. No formal inspection.

Mr. HAY. But the Surgeon-General testified the other day that he sent somebody—

Doctor VAUGHAN. Oh, from the bureau, you mean?

Mr. HAY. Yes.

Doctor VAUGHAN. Oh, yes; they come at any unexpected time. They drop in, you know, when they don't know anything about it.

Mr. HAY. What is your opinion as to the kind of inspection that an institution of this sort ought to have?

Doctor VAUGHAN. Do you mean marine hospitals?

Mr. HAY. No; I mean the Government Hospital for the Insane.

Doctor VAUGHAN. I think it is well enough to inspect them, certainly. It is a good thing to keep the men on the lookout, to keep them at their best, to make inspection at intervals. I wouldn't say how often it is necessary to do that.

Mr. HAY. But you think some inspection of that kind ought to be had in all institutions, do you not?

Doctor VAUGHAN. I think, as a rule, that is true. There is one difference that might be made, possibly, with the Government Hospital for the Insane. That is under the direction of a very high official, one who corresponds to some extent with the Surgeon-General of the Marine Hospital Service. The Surgeon-General himself is not often inspected, certainly, and I don't know that the Superintendent of the Government Hospital for the Insane should be inspected.

Mr. HAY. I do not mean to inspect him. I am talking about inspecting the institution.

Doctor VAUGHAN. Well, I don't know. As long as he is there I should think he ought to inspect it himself.

Mr. HAY. How often?

Doctor VAUGHAN. I don't know. He would either inspect it himself or have some one in whom he had confidence to inspect it. That is the way it is done at marine hospitals. The surgeon in charge does not always do this inspection himself. He delegates it frequently.

Mr. HAY. He delegates it, and then besides that they have what you call a general inspection, that they come at any time?

Doctor VAUGHAN. Yes; that is irregular.

#### TESTIMONY OF CHARLES J. GAWLER.

CHARLES J. GAWLER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your business, Mr. Gawler?

Mr. GAWLER. Undertaker.

The CHAIRMAN. Here in this city?

Mr. GAWLER. Yes, sir; 1730, 1732, and 1734 Pennsylvania avenue NW.

The CHAIRMAN. Do you frequently receive bodies from St. Elizabeth's?

Mr. GAWLER. Very frequently; yes, sir.

The CHAIRMAN. And do you from other institutions here in the city?

Mr. GAWLER. Yes, sir; all the different institutions.

The CHAIRMAN. What is the general condition of the bodies you receive from St. Elizabeth's?

Mr. GAWLER. The condition of the bodies we receive from St. Elizabeth's are in very elegant shape. I have been over there numbers of times, sometimes as high as ten and fifteen times a month, and each and every one has been thoroughly cleansed, and if a man needed shaving he was shaved, and a fresh suit of undersclothing put on him, a fresh shirt and collar and necktie and a uniform—that is, light pantaloons and dark-blue blouse, each and every one of them.

The CHAIRMAN. Is that so whether they are soldiers or not?

Mr. GAWLER. No, sir; if they were not soldiers they wouldn't put those uniforms on.

Mr. SMYSER. You would expect that, would you not?

Mr. GAWLER. Sir?

Mr. SMYSER. You would expect the condition you have described, would you not?

Mr. GAWLER. We don't get it from the other hospitals.

The CHAIRMAN. You mean the condition of things over in St. Elizabeth's is better than it is in other institutions?

Mr. GAWLER. Any one in the District; yes, sir.

Mr. WALLACE. How many do you get over there a year?

Mr. GAWLER. We get, I should say, about 45 or 50.

Mr. WALLACE. How does that compare with the number you get from other institutions?

Mr. GAWLER. It far exceeds the others.

Mr. WALLACE. It far exceeds any other one in the District?

Mr. GAWLER. Yes, sir.

The CHAIRMAN. Do you only go there when you are asked to by outside parties?

Mr. GAWLER. No, sir; we go there for Doctor White. We don't have a contract with them, but there is lots of old soldiers there that have a small amount of money—sometimes \$13, sometimes \$15, sometimes \$35, and Mr. Fronotti, the clerk, he speaks to one of the doctors, Doctor Logie or Doctor Stack, and tells them the amount of money they have and he telephones to us and asks us if we will bury them. Of course we will bury them, and we go over and get them and bring them to our place and then take them to Arlington.

The CHAIRMAN. The coffins are supplied over there, are they?

Mr. GAWLER. No, sir; they are supplied by us. We go and get the bodies and bring them over to our place. We have services at our chapel and then take them over to Arlington.

Mr. SMYSER. Do you take any that have no little pension fund left?

Mr. GAWLER. No, sir; we have taken them when they had as high as \$9 and given them just the same burial as we give a man that had \$35.



Mr. SMYSER. Why do you draw the distinction and not take the fellows who haven't any money?

Mr. GAWLER. They bury them over there themselves. They have a cemetery over there, and they make the coffins and bury them themselves, and I must say I have inspected the coffins over there and they have a very good coffin.

The CHAIRMAN. How long have you been doing that for the hospital?

Mr. GAWLER. I guess for twenty or twenty-five years; I guess from sometime along before Doctor Godding died.

The CHAIRMAN. Was there this same good condition of bodies under Doctor Godding?

Mr. GAWLER. Yes, sir; every one; each and every one just exactly the same.

#### TESTIMONY OF J. S. CARTER.

J. S. CARTER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Carter, are you connected with St. Elizabeth's Hospital in any way?

Mr. CARTER. Yes, sir.

The CHAIRMAN. What is your position there?

Mr. CARTER. I am one of the supervisors.

The CHAIRMAN. Of what ward or set of wards?

Mr. CARTER. Of the Richardson group.

The CHAIRMAN. How many attendants are there under you?

Mr. CARTER. At present there are 41 attendants and nurses.

The CHAIRMAN. That is, day nurses?

Mr. CARTER. Day and night both.

The CHAIRMAN. Your duties are over the night attendants as well as the day attendants?

Mr. CARTER. Yes, sir.

The CHAIRMAN. How many patients are there in that group?

Mr. CARTER. Our capacity is 371. Our present number of patients is 368.

The CHAIRMAN. What have you to say in regard to the general care and treatment of patients over there?

Mr. CARTER. I don't think it could be better. I think everyone is treated as kind and nice as can be.

The CHAIRMAN. How long is it you say you have been in the hospital?

Mr. CARTER. I have been there about sixteen years.

The CHAIRMAN. How long have you been supervisor?

Mr. CARTER. Something over nine years.

The CHAIRMAN. Have you ever had any charges made by patients or patients' friends against attendants for improper treatment of patients?

Mr. CARTER. No; not from patients' friends. I have from patients.

The CHAIRMAN. Have you always investigated those cases?

Mr. CARTER. I have; yes, sir.

The CHAIRMAN. Have you found any of them true?

Mr. CARTER. On one occasion I did; yes.

The CHAIRMAN. What happened to the attendant?

Mr. CARTER. The attendant was discharged.

The CHAIRMAN. What was his name?

Mr. CARTER. Wilson.

The CHAIRMAN. That was Otis Wilson?

Mr. CARTER. Yes, sir.

The CHAIRMAN. What was the matter with him? What did he do?

Mr. CARTER. He struck a patient.

The CHAIRMAN. Under what circumstances? Was the patient unruly?

Mr. CARTER. It was shaving day, and the patient, he said, did not want to get into the chair, and the patient refused. Of course, then he struck him.

The CHAIRMAN. You say that is the only case you have had in the nine years that you have been supervisor?

Mr. CARTER. No, sir; that is recently. That is about five or six months back.

The CHAIRMAN. What other cases have you had in the last three years?

Mr. CARTER. I don't know that I could recall any except that.

The CHAIRMAN. You have had other patients who have made charges besides the Wilson case, have you not?

Mr. CARTER. Well, no; no, sir.

The CHAIRMAN. None at all?

Mr. CARTER. No, sir.

The CHAIRMAN. Do you see the patients frequently and talk with them?

Mr. CARTER. I see them every day; yes, sir. I make three to four rounds daily.

The CHAIRMAN. Do the patients feel free to talk to you about anything?

Mr. CARTER. They seem to; yes, sir.

Mr. SMYSER. How do you receive them when they want to talk to you?

Mr. CARTER. I speak to them. They all know me. Of course they come up and say: "I want to say something to you," and, of course, I listen to them.

The CHAIRMAN. How about the food, Mr. Carter?

Mr. CARTER. I think the food is very good.

The CHAIRMAN. Where do you take your meals?

Mr. CARTER. I take my meals in the hospital building—in R building, with the attendants.

The CHAIRMAN. Is Doctor Logie in charge of the Richardson group?

Mr. CARTER. He is.

The CHAIRMAN. And you make reports to him daily, I suppose?

Mr. CARTER. I make my reports to Doctor Logie; yes, sir.

The CHAIRMAN. Are those reports in writing?

Mr. CARTER. No, sir; verbal.

The CHAIRMAN. Do you make any written reports?

Mr. CARTER. To Doctor Logie?

The CHAIRMAN. To anyone?

Mr. CARTER. I make a written report of the patients, you know. That is, a daily report that I turn in every morning.

The CHAIRMAN. That is filed in the office of the superintendent?

Mr. CARTER. That is filed in the office of the superintendent; yes, sir.

The CHAIRMAN. What does that report contain?

Mr. CARTER. Just the number of sick, the number that have been cut walking, the number that is working, and all that sort of thing.

The CHAIRMAN. Would you report anything in the way of complaints that patients have made?

Mr. CARTER. Yes, sir.

The CHAIRMAN. That is a part of your daily report?

Mr. CARTER. That is a part of the daily report; yes, sir.

The CHAIRMAN. Do you know a Mrs. Frances S. Roland?

Mr. CARTER. No; I do not.

The CHAIRMAN. Who has a son in the asylum?

Mr. CARTER. I know the son, but I don't know Mrs. Frances S. Roland.

The CHAIRMAN. Mrs. Frances S. Roland has testified that in August, 1905, she visited her son and found he was cut over the eye, and she complained to the supervisor. This patient was in Atkins Hall. Do you know anything about that?

Mr. CARTER. Mrs. Roland didn't make any complaint to me. She made it to my assistant.

The CHAIRMAN. She made it to Clarence Carter, I believe. Did you ever hear anything about that case?

Mr. CARTER. No, sir.

Mr. SMYSER. Do you think your manner is such over there that the patients feel free to come to you and make any complaints they may have?

Mr. CARTER. Well, they say so; yes, sir.

Mr. SMYSER. I know they say so. Do you wear a uniform over there?

Mr. CARTER. Yes, sir.

Mr. SMYSER. That may have some restraint on them?

Mr. CARTER. I don't think so. I sometimes go through without the uniform on, when I am not on duty, and they seem to be just as free and easy to me as they would be if I were in uniform.

Mr. SMYSER. Do you do anything to make them feel that they ought not to complain to you?

Mr. CARTER. No, sir; I do not.

Mr. SMYSER. Do you encourage complaints?

Mr. CARTER. Well, yes; if there is any complaint, I like to hear it, certainly.

Mr. SMYSER. You do like to hear it?

Mr. CARTER. I don't like to have my patients complaining, but—

Mr. SMYSER. Behind your back?

Mr. CARTER. Yes, sir; that is it.

Mr. SMYSER. You want them to come to you?

Mr. CARTER. I want them to come to me. That is the idea.

Mr. SMYSER. When they do come, do you try to correct these complaints if they are well founded?

Mr. CARTER. Yes, sir; I do so.

The CHAIRMAN. Atkins Hall is in your group, isn't it?

Mr. CARTER. No.

The CHAIRMAN. Do you think you have enough attendants over there for the proper care of patients?

Mr. CARTER. At present I do; yes, sir.

The CHAIRMAN. You say your full quota is 41.

Mr. CARTER. At present it is 41. We have two vacancies. Forty-three is our full quota.

The CHAIRMAN. You think when you have your full quota that you have enough attendants to take proper care of the patients?

Mr. CARTER. I do; yes, sir.

The CHAIRMAN. Do you think the time of attendance is too severe—for the attendants themselves, I mean.

Mr. CARTER. Well, no; I do not. Each and every ward has one or two patients that will assist, you know—good workers. Very often they will do as much work as some attendant.

The CHAIRMAN. They do sweeping and cleaning, do you mean?

Mr. CARTER. Sweeping and cleaning and making beds, and such like.

The CHAIRMAN. Do these patients seem to like to do this work when they are called upon?

Mr. CARTER. Yes, sir; they do.

The CHAIRMAN. You rather encourage that, do you not?

Mr. CARTER. Yes, sir; we encourage it.

The CHAIRMAN. You never force them to work if they do not want to, do you?

Mr. CARTER. Oh, no, sir.

The CHAIRMAN. What class of patients do you have there generally?

Mr. CARTER. We have a number that are sick in bed and quite a number that are up, you know.

The CHAIRMAN. About how many?

Mr. CARTER. Sick in bed?

The CHAIRMAN. Yes.

Mr. CARTER. We have about 100.

The CHAIRMAN. So, nearly a third of them are sick in bed?

Mr. CARTER. Yes, sir.

The CHAIRMAN. Have you any seriously disturbed patients in your group of buildings?

Mr. CARTER. We have some disturbed patients; yes, sir.

The CHAIRMAN. Do you ever have occasion to restrain them with any appliance like tying them in bed, or putting on this camisole, or things of that kind?

Mr. CARTER. We have had to use the camisole; yes, sir.

The CHAIRMAN. Do you decide when a camisole shall be put on a patient?

Mr. CARTER. No, sir.

The CHAIRMAN. That is left with the doctor, is it?

Mr. CARTER. That is left with the doctor in charge; yes, sir.

The CHAIRMAN. Did you ever know a camisole to be put on a patient or a patient to be tied in bed for purposes of punishment, or in an unnecessary manner?

Mr. CARTER. No, sir; I never did.

The CHAIRMAN. In other words, when they put these camisoles or jackets, or whatever they are, on the patients, it is for what purpose?

Mr. CARTER. Why, it is for the benefit of the patient; to keep him from hurting himself or hurting others.

The CHAIRMAN. Do you think either of those appliances hurts the patient at all?

Mr. CARTER. I do not; no, sir.

Mr. SMYSER. Is it not like switching a boy in school frequently, to make him good?

Mr. CARTER. We don't use any switching over there.

Mr. SMYSER. But you use the sheet and the camisole. Do you ever use them to make them be good?

Mr. CARTER. No, sir.

Mr. SMYSER. I am requested by Mr. Pyles to ask you a couple of questions. How long has it been since you made two or three rounds a day through the hospital?

Mr. CARTER. I make them every day, sir, that I am there.

Mr. SMYSER. How long has it been since you have been making two or three rounds?

Mr. CARTER. That has been ever since I have been supervisor.

Mr. SMYSER. How long has that been?

Mr. CARTER. That has been over nine years.

Mr. SMYSER. Was this true when you were over in the Toner Building?

Mr. CARTER. It was; yes, sir.

#### TESTIMONY OF DR. STERLING RUFFIN.

Dr. STERLING RUFFIN, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Doctor, are you a practicing physician here in Washington?

Doctor RUFFIN. Yes, sir.

The CHAIRMAN. How long have you been practicing medicine?

Doctor RUFFIN. Thirteen years.

The CHAIRMAN. Did you graduate at Georgetown, here?

Doctor RUFFIN. No, sir; I graduated at the Columbian.

The CHAIRMAN. Have you for the last four years been frequently visiting St. Elizabeth's?

Doctor RUFFIN. I can't say that I have frequently. I have occasionally.

The CHAIRMAN. For what purpose?

Doctor RUFFIN. I am on the consulting staff there, and I have on two occasions since Doctor White's superintendency been called to see patients.

The CHAIRMAN. So that since Doctor White has been there you have only been there twice?

Doctor RUFFIN. I think so, sir.

The CHAIRMAN. What was the matter with these patients?

Doctor RUFFIN. I saw a number, on one occasion, of heart cases, and on one other occasion I saw one man who was believed to have some disease of his suprarenal capsules. That is part of the kidneys—a portion above the kidneys.

The CHAIRMAN. What do you think with regard to the care of these patients?

Doctor RUFFIN. I think it was very excellent. They were splendidly cared for.

The CHAIRMAN. Where these patients both in an insane ward?

Doctor RUFFIN. One was, sir; the others were nurses.

The CHAIRMAN. Have you visited nurses—to care for nurses there?

Doctor RUFFIN. I was asked on one occasion to see some nurses who were sick, some nurses in the institution.

The CHAIRMAN. Where did you see them; in the nurses' home?

Doctor RUFFIN. No, sir, I think not. I think I saw them in a room in the women's ward, in one building. I don't know the name of the building. It was the old administration building.

The CHAIRMAN. Do you know anything about the food over there?

Doctor RUFFIN. Only in a general way, sir. Prior to Doctor White's incumbency I inspected some food there on one occasion, and I found it to be very good.

The CHAIRMAN. You do not know specifically about it now?

Doctor RUFFIN. No, sir; I do not.

#### TESTIMONY OF FRANK M. FINOTTI.

FRANK M. FINOTTI, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. Finotti, what is your position over at St. Elizabeth's?

Mr. FINOTTI. I am record clerk, pension clerk, and general clerk, I presume, sir.

The CHAIRMAN. How long have you been there?

Mr. FINOTTI. Twenty-one years.

The CHAIRMAN. Have your duties been the same for the whole twenty-one years?

Mr. FINOTTI. No, sir; eight years an attendant in charge of the hospital ward.

The CHAIRMAN. Since then have you been in the office?

Mr. FINOTTI. Twelve years I have been in the office—a little over; twelve years and a half.

The CHAIRMAN. How long have you had charge of matters pertaining to pensions?

Mr. FINOTTI. I have had complete charge of them, I presume, sir, for about six years.

The CHAIRMAN. You were appointed, then, by Doctor Godding?

Mr. FINOTTI. When Doctor Godding was appointed I used to go through the wards. I was notary at the same time. I am notary for the hospital, and I used to execute the vouchers for the old pensioners. When checks came in they were turned in the office and placed to the credit of the patients—that is, those patients who drew on a certificate from the superintendent that they were mentally competent to execute the vouchers.

There was a great many of them had no relatives, and under the act of August 7, 1882, they were admitted from the Homes. They were national volunteer soldiers, and their pension was turned into the general fund—drawn by the superintendent and turned into the general fund for the general use of the hospital.

The CHAIRMAN. Are there some patients over there who are able to sign their own vouchers?

Mr. FINOTTI. At the present time?

The CHAIRMAN. Yes.

Mr. FINOTTI. I would presume so, sir. I haven't seen any of them to talk to for the last year or so. Since the act of February 20, 1905, went into effect the superintendent has been drawing all the pensions. Therefore I have not talked with them, but I presume plenty of them there could draw it, but I wouldn't like to decide that question.

The CHAIRMAN. If a man is able to sign his own vouchers, knows what he is doing, why is he kept there in the asylum?

Mr. FINOTTI. A man may be able to sign a voucher, sir, and execute a paper, and still have certain periods that he is not able to live outside. I have seen plenty of patients come to my desk there to execute papers and talk rationally to me, and a little while afterwards, maybe a week or ten days—maybe it is some mania or something of the kind. I am not a doctor, so I don't know—they would be away off, wouldn't know what they were doing. They have certain periods that they are mentally competent to sign.

The CHAIRMAN. Just what do your duties consist of in regard to these pensions?

Mr. FINOTTI. You mean at the present time?

The CHAIRMAN. Yes.

Mr. FINOTTI. At the present time I make out the vouchers and forward them to the pension agent—

The CHAIRMAN. You receive the vouchers from the Pension Department, do you?

Mr. FINOTTI. No, sir; I make the vouchers out myself. We always have the blank vouchers and make out the vouchers for each pensioner in the house.

The CHAIRMAN. You get the blanks from the Pension Department?

Mr. FINOTTI. Yes.

The CHAIRMAN. And they are the same kind of blanks that are used in all pension cases, are they not?

Mr. FINOTTI. Not exactly. They are the same as at the Homes, all the National Homes, and the old soldiers' home over here. They are payable to and drawn by the superintendent of the hospital under the act of February 20, 1905. I think when that act was made it repealed the act of August 7, 1882. The act of August 7, 1882, gave the hospital all the pension of any soldier that was admitted there from the national homes and had no dependent relatives—that is, a father or a mother or a wife or a minor child under 16 years of age, and Doctor Richardson when he came there, he saw the injustice of it, and I have talked to old Doctor Godding many a time, and he thought it was an injustice.

Doctor Richardson was going to have the law repealed if he could and have another act, so the superintendent could draw the pensions and place a certain amount to the pensioner's credit and the balance go toward the hospital for the pensioner's support. In the meantime the superintendent, Doctor Richardson, died, and Doctor White got up a bill which was passed. The pensioner gets one-sixth of the pension for his personal use, which is placed to his credit on the hospital books, and he can use it for any little article he wants. The other five-sixths, if he has no dependent relatives, goes to the hospital.

Mr. SMYSER. Do you open an account with each one?

Mr. FINOTTI. I do not; no, sir.

Mr. SMYSER. Well, on the books?

Mr. FINOTTI. Certainly, sir; the financial clerk keeps account of each one.

The CHAIRMAN. How does the pensioner draw this one-sixth that he gets himself? Does he go over and ask you for it?

Mr. FINOTTI. No, sir. That goes to his credit on the books, and every week, I think Friday, they go to their supervisor, and if they want a dollar or two for spending money they make a requisition. That requisition is signed by the supervisor and goes to the physician in charge of that department. He approves it if he thinks the money is not wasted. Then it goes to the superintendent, and the superintendent approves it again, and it goes to the financial clerk. She draws it out and gives it to the supervisor. He pays each one of these patients whatever it is; but if he wants to get any clothing or anything out of that money, or anything outside, then a bill is rendered and the check sent for it and paid and credited to that one-sixth.

The CHAIRMAN. Charged to the one-sixth?

Mr. FINOTTI. Charged. Now, you must remember, sir, that if the pensioner has a dependent relative—that is, a wife or a father or mother dependent on him—then they get five-sixths of it if it is up to \$12. Everything over that they get \$10 a month. Over \$20 the dependent gets a half. One-sixth still goes to the credit of the pensioner—his personal account. A certain amount, under certain rules and regulations the Secretary of the Interior has formulated, goes to his personal credit on another account in the books, and the remainder goes toward his board; but he has got to get over \$20 a month for the hospital to get anything. If he should die or leave the hospital, then his widow will get the personal money and the hospital gets nothing; but if he has no widow, and he has friends that have made requisition and want to have him buried at Arlington instead of our cemetery over there, and there is money enough to pay for a coffin and removing the remains and embalming, he is sent to Arlington and buried there, and it comes out of that personal account of his.

Mr. SMYER. Do you disburse this money to dependents?

Mr. FINOTTI. The superintendent does; yes, sir.

The CHAIRMAN. About how much pension money is there there now belonging to everybody?

Mr. FINOTTI. Well, I should say, since the act of February 20 went in force, there is somewhere in the neighborhood of between \$70,000 and \$80,000 been drawn. What was drawn before that under the act of August 7, 1882, has already gone into the fund toward the support of the hospital, so you can't count that. I don't know what that amounts to. I should say there is anywhere between \$20,000 and \$30,000—may be \$40,000—that belongs to the pensioners, that was drawn on the superintendent's certificate that they were mentally competent at the time to execute their vouchers. That was before the act of February 20 went in force. They drew that themselves, and that money is there to their credit—no longer pension money.

The CHAIRMAN. If a pensioner dies and leaves a widow or minor children or a father or mother, the balance to his credit after paying his funeral expenses, if he is buried in Arlington, goes to that family?

Mr. FINOTTI. Yes, sir.

The CHAIRMAN. But if he has not as near relatives as that, it goes to the general fund of the hospital; is that it?



Mr. FINOTTI. Exactly.

The CHAIRMAN. How do you get paid; I mean is your salary charged to the hospital fund, or do you get paid directly as an officer of the Government?

Mr. FINOTTI. To the hospital fund—general appropriation.

The CHAIRMAN. What do you get?

Mr. FINOTTI. \$1,200.

The CHAIRMAN. Do you live over at the hospital?

Mr. FINOTTI. No, sir; I haven't lived there. I take my noon meal there. I haven't lived there for about nine or ten years now. I moved into Anacostia. It was nearer for me. When I lived in the country I had the right to my room and board, but I take my noon meal there. That is all.

Mr. SMYSER. When an old soldier dies and there is some money there that goes to the dependents, does the hospital hunt them up and send them that money?

Mr. FINOTTI. Do you mean a pensioner or a soldier belonging to the service?

Mr. SMYSER. I mean a pensioner.

Mr. FINOTTI. If the money was in there and was drawn by that soldier himself, on his own voucher, with a certificate to the superintendent of the hospital—that, however, is before the act of February 20, 1905—

Mr. SMYSER. You do not apprehend my question. Suppose to-day some old pensioner over there should die, and he has dependents, and there is some fund there which, under the law, would go to the dependents; do you people there send that money forward to those dependents?

Mr. FINOTTI. Oh, now you are talking.

Mr. SMYSER. I thought I was talking before.

Mr. FINOTTI. If it is a wife—she would be the wife until then, and then she would be the widow—and she notifies the hospital, or we know her address, we notify her that there is so much money remaining to her husband's credit, which we will forward to her if she has made a voucher before the pension bureau that she is the widow, and in good standing. If the wife is dead, and there are minor children under 16, we compel them to take out letters of administration, if there is over \$100. If there is less than \$100, and they have been communicating with the hospital time and again, and we know it is all right, we send them the money as soon as they make application after we notify them that it is there.

The CHAIRMAN. Immediately after the pensioner dies you notify his friends that there is so much money to his credit, do you?

Mr. FINOTTI. No, sir.

Mr. SMYSER. Why don't you?

The CHAIRMAN. I mean when there is a widow and minor children, or things of that kind.

Mr. FINOTTI. There is very little left when there is minor children, and the widow.

The CHAIRMAN. They have been getting it all the time while he is alive?

Mr. FINOTTI. Yes. We have only drawn five quarters since this law has been in force. Take a \$12-a-month man, and he has from \$18 to \$24 to his credit, and the wife has got the balance. She got it

while she was the wife, and it don't leave anything. If it is \$72 a month the wife gets \$36 while the pensioner is living, and the pensioner gets \$12 a month, and the balance, I think, something like \$18.33, if I am not much mistaken, went to the hospital for the support of the patient, and the balance went to his personal credit, and that, after he died, the widow can get.

Mr. SMYSER. Do you have instances over there where it turns out that there is a wife, perhaps, and children, but who are not known to the Department until the soldier is dead?

Mr. FINOTTI. Are you talking about an old fund?

Mr. SMYSER. Do you have instances over there in which it turns out after the soldier is dead that there is a wife? Do you have such instances where it is not known to the hospital that there is a wife until the pensioner has died?

Mr. FINOTTI. Yes, I presume so.

Mr. SMYSER. Well, in such cases there is nothing for the widow. That fund, under the law, is turned in to the hospital, is it not?

Mr. FINOTTI. If we did not know there was a widow, you mean?

Mr. SMYSER. Yes.

Mr. FINOTTI. If we were not informed that there was a widow, certainly it is. If we know the wife is living—

Mr. SMYSER. Are you pretty quick on the trigger in turning that into the general fund, or do you wait some time to find out if there is a widow?

Mr. FINOTTI. It has not been turned in yet, sir—I am confident of that—into the general fund.

Mr. SMYSER. How long do you wait in such a case?

Mr. FINOTTI. It has not been turned in yet. If you are talking about money drawn under the act of August 7, 1882—

Mr. SMYSER. I do not care what act it is under which it is drawn. I want to get a state of facts.

Mr. FINOTTI. Well, I am stating facts.

Mr. SMYSER. Are you having in mind the condition that I am after? You may have an old soldier over there who is drawing a pension—

Mr. FINOTTI. Yes.

Mr. SMYSER. And he may in fact have a wife and the hospital not know it. Is not that true?

Mr. FINOTTI. It might be, but I hardly think so. You have got to remember that we do not investigate this. The Pension Bureau does. We do not pay a cent to the wife or turn a cent into the hospital fund until the Pension Bureau has recommended to the Secretary of the Interior that the pensioner is without dependent relatives.

Mr. SMYSER. You turn that over to the Pension Department then, and they investigate, instead of investigating at the hospital. Is that it?

Mr. FINOTTI. Yes; the Pension Bureau investigates and recommends to the Secretary of the Interior. We do not investigate.

Mr. WALLACE. You live at your own residence, away from the hospital?

Mr. FINOTTI. What?

Mr. WALLACE. I say, you live away from the hospital?

Mr. FINOTTI. Yes, sir; I live in Anacostia.

Mr. WALLACE. What is your reason for that, when you could have your living free, as you state?

Mr. FINOTTI. What is my what?

Mr. WALLACE. You could have your living free at the hospital, I understand you to say?

Mr. FINOTTI. Yes, sir.

Mr. WALLACE. Then what reason have you for not staying there?

Mr. FINOTTI. Well, I have six children, sir, and wife and myself to look after, and I would rather be home with them.

The CHAIRMAN. That is seven good reasons.

Mr. FINOTTI. That is very simple, sir. I have lived there for about twelve or thirteen years, and take three meals——

The CHAIRMAN. And your wife and children could not live at the hospital free, could they?

Mr. FINOTTI. No; I would like to have them live there. I would like to see you make a recommendation to have them live there. It would save some money in my pocket.

Mr. WALLACE. I would like to ask one more question, and then I believe I am through. Does the food at the hospital have anything to do with the place you select for living?

Mr. FINOTTI. Not a bit, sir.

#### TESTIMONY OF DAVID M. ALLEN.

DAVID M. ALLEN, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you an attendant over at the hospital?

Mr. ALLEN. I am, sir.

The CHAIRMAN. How long have you been there?

Mr. ALLEN. I guess very near ten months.

The CHAIRMAN. What ward are you in?

Mr. ALLEN. I am in Elm Ward now, on night duty.

The CHAIRMAN. How long have you been there?

Mr. ALLEN. I have been there about a couple of weeks, I guess.

The CHAIRMAN. Where were you before?

Mr. ALLEN. In the B building?

The CHAIRMAN. Were you in the B building all of the time since you have been at the hospital with the exception of these two weeks?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. Did you know a man by the name of Teates?

Mr. ALLEN. Yes, sir; I was on the ward with him.

The CHAIRMAN. Was he ever hurt there in the hospital?

Mr. ALLEN. No, sir.

The CHAIRMAN. Did you know a patient by the name of Butts?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. What sort of a patient was he?

Mr. ALLEN. He was very good.

The CHAIRMAN. What do you mean by very good? Was he disturbed often?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. I would like to know what a very good patient means. Is a disturbed patient a very good patient?

Mr. ALLEN. Very good at times and disturbed at others.

The CHAIRMAN. Did he have an accident there in the hospital?

Mr. ALLEN. Yes, sir; before I came there, though.

The CHAIRMAN. What happened to him?

Mr. ALLEN. He had his leg broke, and when I got there he was on a double bed—two beds side by side.

The CHAIRMAN. Was his leg in a cast at that time or was it healed entirely?

Mr. ALLEN. It had healed; yes, sir.

The CHAIRMAN. Did you ever see Teates abuse this man Butts?

Mr. ALLEN. No, sir.

The CHAIRMAN. Did you ever see anybody abuse him?

Mr. ALLEN. No, sir.

The CHAIRMAN. Since you have been in the hospital, for ten months, have you ever known of any of the attendants abusing any of the patients?

Mr. ALLEN. No, sir; I have never seen a patient abused in B building since I have been there.

The CHAIRMAN. Or in this Elm ward where you are now?

Mr. ALLEN. In Elm ward, the same thing. I have been working on Elm ward I guess about a couple of weeks.

The CHAIRMAN. What do you think about the food in the institution?

Mr. ALLEN. It is very good.

The CHAIRMAN. Do you have plenty of it?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. Do you have the same kind of food the patients have?

Mr. ALLEN. Well, generally; yes, sir.

The CHAIRMAN. From what kitchen were the meals served in this ward where you were on day duty?

Mr. ALLEN. Right in the building; I don't know exactly. Well, it is right in the same building that I work in.

The CHAIRMAN. What was your business before you went out there?

Mr. ALLEN. Farming.

Mr. SMYSER. A what? A farmer?

Mr. ALLEN. Yes.

The CHAIRMAN. Where?

Mr. ALLEN. In Virginia.

Mr. SMYSER. How old are you?

Mr. ALLEN. About—

Mr. SMYSER. Oh, it will not affect your chances for marriage.

Mr. ALLEN. I guess I am about 21, and eight or nine months, I guess.

Mr. SMYSER. And you are a Virginia farmer?

Mr. ALLEN. Yes, sir.

Mr. SMYSER. Would you tolerate, if you were to see it—

Mr. ALLEN. What?

Mr. SMYSER. I say would you tolerate it if you were to see cruelty practiced toward a patient out there?

Mr. ALLEN. Yes, sir. [Laughter.]

Mr. SMYSER. Perhaps you do not understand me.

Mr. ALLEN. How is that?

Mr. SMYSER. If you were to see an attendant out there—first, let me ask you, would you abuse a patient yourself?

Mr. ALLEN. Oh, no; no, sir.

Mr. SMYSER. Would you see another patient abuse a patient?

Mr. ALLEN. No, sir.

Mr. SMYSER. What would you do if you saw that?

Mr. ALLEN. Well, I would report it.

The CHAIRMAN. Did you know an attendant by the name of George Thorn?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. Is he over there now?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. Did you ever see him misuse a patient?

Mr. ALLEN. Not as I recollect, sir.

The CHAIRMAN. What?

Mr. ALLEN. No, sir; I don't believe I have.

The CHAIRMAN. You know, do you not, one way or the other? You must remember ten months back. You say you do not believe you have. What do you mean by that?

Mr. ALLEN. Well, I know I have not.

The CHAIRMAN. Why do you not say so then? Did you know a patient by the name of Shuster?

Mr. ALLEN. No, sir.

Mr. SMYSER. Were you ever called as a witness before?

Mr. ALLEN. No, sir.

The CHAIRMAN. Did you know a man by the name of Barnard Allen?

Mr. ALLEN. I know of him. He left after I came there to go to work, I believe.

The CHAIRMAN. What do you think about the hours you have to work there?

Mr. ALLEN. I think they are right long.

Mr. SMYSER. And you so fresh from the farm?

Mr. ALLEN. Yes, sir.

The CHAIRMAN. Do you have to work any more hours a day over there than you did on the farm?

Mr. ALLEN. Sir?

The CHAIRMAN. I say, do you have to work any more hours a day over there than you did on the farm?

Mr. ALLEN. The farm I was working on, I did. The farm I was on I was my own boss.

#### TESTIMONY OF HENRY G. BROWN.

HENRY G. BROWN, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you an attendant over in the hospital?

Mr. BROWN. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. BROWN. Eight months the 30th day of this month—the last day.

The CHAIRMAN. Where did you come from?

Mr. BROWN. I came from Virginia, Culpeper County.

The CHAIRMAN. What were you doing before you went there?

Mr. BROWN. I was farming.

The CHAIRMAN. Were you your own boss?

Mr. BROWN. Well, partly I was.

The CHAIRMAN. How old are you?

Mr. BROWN. Twenty-one years old the 2d day of this month past.

The CHAIRMAN. What ward are you in?

Mr. BROWN. I am in hall 3, B building.

The CHAIRMAN. How long have you been there? Ever since you went there?

Mr. BROWN. Not in that hall. I have been in B building, though, ever since I have been there.

The CHAIRMAN. How much pay do you get?

Mr. BROWN. Well, I have been drawing \$18 up to last month. I have drawn one \$20 check.

The CHAIRMAN. So your salary was raised last month?

Mr. BROWN. Yes; to \$20. I drew one \$20 check.

The CHAIRMAN. Did you know a man by the name of T. W. Belt?

Mr. BROWN. Yes, sir; I know of him. I don't know much about him.

The CHAIRMAN. Do you know an attendant by the name of Teates?

Mr. BROWN. Yes, sir; I know an attendant by that name.

The CHAIRMAN. Did you know an attendant by the name of Butts?

Mr. BROWN. No, sir.

The CHAIRMAN. You did not?

Mr. BROWN. I do not; no, sir.

The CHAIRMAN. Did you ever see Teates illtreat patients?

Mr. BROWN. No, sir; I did not.

The CHAIRMAN. Did you ever see any attendant illtreat patients?

Mr. BROWN. No, sir; I did not.

The CHAIRMAN. You never saw a patient struck?

Mr. BROWN. Well, no; not by an attendant.

The CHAIRMAN. You mean that you have seen them struck by a patient?

Mr. BROWN. Well, I don't really say that they were struck by a patient.

The CHAIRMAN. Who were they struck by?

Mr. BROWN. I don't say they were struck by anybody.

The CHAIRMAN. Have you ever seen any of them struck by an attendant?

Mr. BROWN. No, sir; I have not.

The CHAIRMAN. Have you ever seen any of the patients get into scraps?

Mr. BROWN. Well, a little bit; yes, sir; but they didn't amount to much.

The CHAIRMAN. How many patients are there in the ward you are in now?

Mr. BROWN. There is only about—the capacity is about 26, but I don't think there is over about 25—24 or 25, or something of that sort.

The CHAIRMAN. How many are there on that ward with you?

Mr. BROWN. There are 3 attendants there and 1 nurse.

The CHAIRMAN. So there are 4 altogether in the daytime?

Mr. BROWN. I am only just a special attendant there for 1 patient. I don't work on the whole ward.

The CHAIRMAN. You say you only take care of 1 patient?

Mr. BROWN. Yes, sir; at the present time. I have been, for about six weeks, I guess.

The CHAIRMAN. What kind of a patient is he?

Mr. BROWN. Well, he is not so very much trouble. He don't know much at times.

The CHAIRMAN. What do you have to do? Do you do everything for him, take care of him, as if he were a baby?

Mr. BROWN. No, sir. I take him out walking every day that it is fit to go out walking, and I fix his tray out three times a day, and keep the room straightened up, keep him clean, and keep clean clothes on him.

The CHAIRMAN. Is he a pay patient?

Mr. BROWN. Yes, sir; I guess he is.

The CHAIRMAN. Is that the reason he has a special attendant, because he pays for it?

Mr. BROWN. I suppose so; yes, sir.

The CHAIRMAN. Who is it that you are in charge of?

Mr. BROWN. Gen. W. E. Berkhimel.

Mr. SMYSER. Say, my son——

Mr. BROWN. Yes, sir.

Mr. SMYSER. How did you happen to go out here to the hospital?

Mr. BROWN. I beg your pardon?

Mr. SMYSER. How did it happen that you went out to the hospital to get employment?

Mr. BROWN. I just absolutely put in an application to go over there, to get a job over there.

Mr. SMYSER. And you succeeded?

Mr. BROWN. Yes, sir; I succeeded.

Mr. SMYSER. When did you first learn that there was trouble out there; that there were complaints made of cruelty and all that? Did you hear that before you went there, or after?

Mr. BROWN. No; it was after. I didn't know anything about the place, much, before I went there. At least, I had been there several times, but I didn't know anything about any trouble there.

Mr. SMYSER. Now, you are a nice, young boy, and you come from the country——

Mr. BROWN. Yes, sir; I hope so. [Laughter.]

Mr. SMYSER. And you have looked around. What have you ever seen, since you have been there, that is wrong in the treatment of patients?

Mr. BROWN. I have not seen anything there wrong in the treatment of patients.

Mr. SMYSER. You kind of look around a little. You want to get acquainted with the institution and see what is going on?

Mr. BROWN. Oh, that is all very true. I have not seen any patients mistreated over there.

Mr. SMYSER. You would tell us, would you not, if you had witnessed anything of that sort?

Mr. BROWN. Oh, certainly I would.

Mr. SMYSER. You are not afraid of losing your job?

Mr. BROWN. No, sir; and if I had seen patients mistreated I would have reported it to the doctor before.

Mr. SMYSER. You believe, yourself, in treating them kindly?

Mr. BROWN. Certainly I do.

Mr. SMYSER. And in having that sort of treatment from others?

Mr. BROWN. Yes, sir; I do.

Mr. SMYSER. Do you think it is possible for acts of cruelty to be indulged in out there while you have been there and you not know something about it?

Mr. BROWN. Yes; I do not know if that could not be. Very likely it could be.

Mr. SMYSER. And you not know it?

Mr. BROWN. And I not know nothing about it; but not very likely on my ward.

Mr. SMYSER. You feel sure that it has not occurred on your ward, do you?

Mr. BROWN. Yes, sir; I am pretty well sure of that.

Mr. SMYSER. It might occur off in some other place and you not know it?

Mr. BROWN. Yes; it might have been that. I know nothing about that.

Mr. SMYSER. Have you a Virginia Association out there?

Mr. BROWN. Yes, sir; some that I went to school with. That is partly the reason why I wanted to go there and get a job. I had some friends there. You asked me a while ago why I went there to get a job.

Mr. SMYSER. Well, that sort of association reaches back into Virginia, and boys like yourself make application and go there?

Mr. BROWN. Oh, yes.

Mr. SMYSER. I do not mean that there is anything improper in it at all.

Mr. BROWN. Yes; a good many country greenhorns, as somebody said here, are there, I guess.

Mr. SMYSER. No; not the greenhorn that comes from the farm.

The CHAIRMAN. Did you know a patient by the name of August H. Holmberg?

Mr. BROWN. No, sir; I did not.

Mr. WALLACE. You say you are out a good deal of the time walking with the patient?

Mr. BROWN. Yes, sir.

Mr. WALLACE. How many hours are you away from your ward in that way?

Mr. BROWN. I generally go out at 1 o'clock in the afternoon, and I generally aim to get back about half-past 3.

Mr. WALLACE. So you do not know what occurs at your ward while you are away?

Mr. BROWN. No; but if anything serious occurred I would hear about it when I got back.

Mr. WALLACE. You would find some evidence of it probably?

Mr. BROWN. Yes, sir.

The CHAIRMAN. There is one question I would like to ask. From your observation there what do you think about the cleanliness of the wards? Are they kept clean, and are the patients kept clean?

Mr. BROWN. Very nicely, to my knowledge, on B building, the ward I work on.

The CHAIRMAN. I only want to know about the wards you know of.

Mr. BROWN. To my knowledge they are kept very nicely.



The CHAIRMAN. The beds are kept clean?

Mr. BROWN. Yes, sir.

The CHAIRMAN. And the clothing of the patients? If they soil their clothing or anything of that kind, are they changed promptly?

Mr. BROWN. Yes, sir.

Mr. SMYSER. Have you some patients there who soil themselves?

Mr. BROWN. Yes, sir.

Mr. SMYSER. How soon are they changed?

Mr. BROWN. Just as soon as they find they are soiled.

Mr. SMYSER. But that might be the next day?

Mr. BROWN. Oh, no; they go around and examine those patients. They have got those patients spotted, and they know exactly who is untidy, and they go around and look after those patients frequently.

#### TESTIMONY OF J. A. WHITFIELD.

J. A. WHITFIELD, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your business?

Mr. WHITFIELD. The wholesale meat business.

The CHAIRMAN. Here in Washington?

Mr. WHITFIELD. Yes, sir.

The CHAIRMAN. Do you furnish any meats to the hospital?

Mr. WHITFIELD. We furnished on last year's contract hams and bacon, and I presume that on next year's contract we will furnish hams and corned beef. Our bid is slightly lower than the other competitors.

The CHAIRMAN. Are the hams and bacon contracted for with the Department of the Interior?

Mr. WHITFIELD. Yes, sir.

The CHAIRMAN. After competitive bidding?

Mr. WHITFIELD. Yes.

The CHAIRMAN. How much do you furnish them in the course of a month?

Mr. WHITFIELD. They use approximately from 3,000 to 3,500 pounds of bacon a month, and 3,500 to 4,000 pounds of ham monthly.

The CHAIRMAN. What kind of bacon and hams do you furnish the hospital?

Mr. WHITFIELD. We furnish them good No. 1 stock.

The CHAIRMAN. Where do most of the hams come from?

Mr. WHITFIELD. We buy them from packers throughout the West. Some we cure here locally. In the winter time we cut quite a few hogs and cure a good many pounds.

Mr. HAY. From whom do you buy out West?

Mr. WHITFIELD. We buy through brokers in Chicago; Sinclair & Co., the Cudahy Packing Company, the National Packing Company, Armour—

Mr. HAY. You say you expect to get the contract for the next year?

Mr. WHITFIELD. We hope to. We are the lowest bidders on hams and corn beef for the next year's contract. It has not been awarded as yet, though.

Mr. HAY. How do you know you are?

Mr. WHITFIELD. We attend the open hearings of the committee

where the proposals are received, and we take down the bids, and from that we know we are slightly lower on hams and slightly lower on corned beef than other competitors. I think in one case the corned-beef contract is only 10 cents a hundredweight, or one-tenth of a cent a pound, and on the ham contract I think it was—I have forgotten whether it is two cents a hundredweight or what, but is a very small amount.

Mr. HAY. Do you mean that you furnish the hospital hams for 2 cents a pound?

Mr. WHITFIELD. No, sir. I mean that the lowest competitor bid about 2 cents a hundredweight more than we did. As I remember, our contract for the next year is \$11.35, and I think the next bidder is \$11.48. I am not sure now. It has been some time since we opened the bids. But it is a very small amount anyway, the difference between the prices.

Mr. HAY. How much corned beef does the contract call for?

Mr. WHITFIELD. If I remember rightly the contract calls for 20,000 pounds of corned beef for the year. We have not been awarded the contract, but we are 10 cents a hundredweight, or one-tenth lower than the next bidder.

The CHAIRMAN. Do you ever have any hams or bacon returned to you?

Mr. WHITFIELD. Yes, sir.

The CHAIRMAN. What do you think of the inspection that is had out there in the hospital?

Mr. WHITFIELD. At times I have been thinking it is altogether too close.

The CHAIRMAN. Do you furnish supplies to other institutions here?

Mr. WHITFIELD. I furnish, through another man in town, one of our stockholders, a wholesale grocer, who has had a considerable contract business. He has bought a lot of stuff for contract from our company. So indirectly our firm has gone to other institutions, to a great many of them.

The CHAIRMAN. What other institutions?

Mr. WHITFIELD. We furnish the Soldiers' Home, I imagine, practically all the hams and bacon and shoulders, I believe, that they have used in the past year, and maybe longer than that. I think there is a District contract, and I believe that takes in several institutions with which I am not familiar, because we do not bid on the contracts ourselves at all. It is too small, and the delivery is too far away for us to bid on it.

The CHAIRMAN. Is the inspection as rigid at these other institutions as it is at St. Elizabeth's?

Mr. WHITFIELD. I think it is. I think the inspection at the Soldiers' Home is very rigid—so rigid that I have been told of their cutting the strings off of the hams and sending the string back. You know you can not smoke the hams without putting strings on them, and the string does not weigh much.

The CHAIRMAN. You mean that they did that on account of the weight?

Mr. WHITFIELD. Yes, sir. They inspect them closely, and cut the strings off before they put them onto the scale. The hospital has not got that bad yet. I would state that a short time ago I sent over

to the hospital some bacon. The contract called for bacon in about 4 or 6 pound pieces. We smoke and send over, say, approximately 200 pieces at one delivery, and 4 pieces out of that lot came back out of 200. The criticism was that where the string went into the bacon it was not nice. You know how bacon is strung. You put a piece of string through. Where the string goes through the smoke can not get in and dry it and color it to the smoke color like the other part. It seemed to me like an awful close question. We had no difficulty in selling the bacon to our trade at a considerably higher price.

#### TESTIMONY OF CHARLES ETZLER.

CHARLES ETZLER, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. What is your business?

Mr. ETZLER. The wholesale meat business.

The CHAIRMAN. Here in the city of Washington?

Mr. ETZLER. Yes, sir.

The CHAIRMAN. Do you supply any meats to the St. Elizabeth's Asylum.

Mr. ETZLER. The fresh beef; yes, sir.

The CHAIRMAN. Do you do it under contract with the Interior Department?

Mr. ETZLER. Yes, sir.

The CHAIRMAN. And you receive the contract after competitive bidding, I suppose?

Mr. ETZLER. Yes, sir.

The CHAIRMAN. How much do you supply them?

Mr. ETZLER. The contract calls for about 350,000 pounds a year, more or less. Of course, they can get more, and they can take less.

The CHAIRMAN. Where do you get this meat from?

Mr. ETZLER. We get it from Chicago, St. Louis, Omaha, Kansas City, and Fort Worth. They are our shipping points.

The CHAIRMAN. Have you ever had any of the meat that you have sent to them sent back to you?

Mr. ETZLER. Yes, sir.

The CHAIRMAN. For what reason?

Mr. ETZLER. Well, at this time of year especially, if we unload a car of beef and load it on the wagons it is about an hour and a half drive up there, and you have to let the horses walk, and in the warm weather it sweats, and if it is a little sticky, or sweaty, it comes back. They claim it is not fresh, and they send it back to us.

The CHAIRMAN. What do you do with the meat that is sent back?

Mr. ETZLER. We sell it.

The CHAIRMAN. Do you think the inspection is unfair to the meat man?

Mr. ETZLER. I think it is close at times; yes, sir.

The CHAIRMAN. Do you furnish meat to other institutions here?

Mr. ETZLER. We furnish Fort Hunt, Va.—the commissary department.

The CHAIRMAN. Did you ever have any trouble with the meat that you sent there?

Mr. ETZLER. No, sir.

The CHAIRMAN. Do you think the inspection at St. Elizabeth's is as good as it is at Fort Hunt?

Mr. ETZLER. Yes; and possibly better. I never have any that comes back from the people at Fort Hunt.

The CHAIRMAN. Fort Hunt is an army post?

Mr. ETZLER. Yes, sir.

The CHAIRMAN. How are the contracts made with Fort Hunt? Are they yearly or monthly?

Mr. ETZLER. Yearly.

Mr. SMYSER. Is there anything, in fact, the matter with this meat that the hospital sends back in the condition you have described?

Mr. ETZLER. No, sir.

Mr. SMYSER. Why do you not insist on them keeping it, then?

Mr. ETZLER. What is the use?

Mr. SMYSER. I do not know.

Mr. ETZLER. They turn it down, and you have got to take it back.

Mr. SMYSER. Why?

Mr. ETZLER. They claim it is not good.

Mr. SMYSER. And it goes back?

Mr. ETZLER. It is much easier to take it back than to send a man over to look after it, and possibly two or three men. We take it back and dispose of it. We can always dispose of it at a better price than the contract is bringing.

Mr. SMYSER. You do not care if a little of it is sent back?

Mr. ETZLER. Not unless they send back too much.

Mr. SMYSER. If it is just enough, you can stand it?

Mr. ETZLER. Yes, sir.

The CHAIRMAN. Did you ever have any trouble about the meat you sent over there not being up to weight?

Mr. ETZLER. No, sir.

The CHAIRMAN. What is the maximum weight, and what is the minimum?

Mr. ETZLER. Six hundred pounds.

The CHAIRMAN. Six hundred pounds is the minimum?

Mr. ETZLER. Yes, sir.

The CHAIRMAN. And how heavy can it be?

Mr. ETZLER. Well, not over 700 pounds. They do not care to handle over 700 pounds.

The CHAIRMAN. One of the witnesses testified here that lots and lots of meat, fresh meat that was received over there, was away under weight, and that some of it did not weigh 400 pounds.

Mr. ETZLER. He did not know what he was talking about.

The CHAIRMAN. It is not true?

Mr. ETZLER. No, sir.

The CHAIRMAN. Do you furnish all the fresh meat to the hospital?

Mr. ETZLER. I furnish all the fresh meat that goes to the Insane Asylum, sir.

Mr. SMYSER. How do you know that he did not know what he was talking about? Do you inspect all of the carcasses that go there, so that you know they are over 400 pounds?

Mr. ETZLER. I do more than that. I get it out, and see that it is trimmed, and see that it goes there.

Mr. SMYSER. Of course you do not weigh it?

Mr. ETZLER. Sometimes I weigh it. I weighed a load that went over there yesterday.

The CHAIRMAN. I suppose when there is such a great difference as the difference between 400 and 600 pounds, you would know it from your experience, without weighing it?

Mr. ETZLER. There has been no such thing as a carcass going over there that weighed 400 pounds.

Mr. SMYSER. How did that witness get that in his head?

Mr. ETZLER. I don't know, unless he lied.

Mr. SMYSER. You are like the boy at Sunday school.

Mr. ETZLER. I am right here; yes, sir; to tell you what I know.

The CHAIRMAN. Let me ask you about another thing. Is this meat that is sent over to the hospital the same quality of meat that you sell in the private trade, or to butchers who supply private trade?

Mr. ETZLER. Yes, sir; it is out of the regular cars. We get a car here from Chicago, and get an order from the Insane Asylum—say for 7,500 pounds—as I do every week. If the car is here from Chicago or Kansas City on Monday morning, I give them that beef right out of that car.

The CHAIRMAN. From the same place you take it for any other customer?

Mr. ETZLER. Yes, sir; for anybody else—the same place.

The CHAIRMAN. Do you sell to many of the butchers here in town?

Mr. ETZLER. Yes, sir. This week I have one hundred and forty odd cattle to sell.

Mr. SMYSER. This week, you say. How many did you have last week?

Mr. ETZLER. 131. I average about 125 or 135 cattle a week.

Mr. SMYSER. So the meat investigation has not affected you?

Mr. ETZLER. Oh, I have sold a good deal more; yes, sir. It has not done us any good.

Mr. WALLACE. What is the lightest weight you have ever sent there?

Mr. ETZLER. As near as I can tell about 500 pounds. I do not think anything has been sent over less than 500 pounds; in fact, I am almost positive of it.

The CHAIRMAN. Is the weight of the meat marked on the cattle—on one of the bones or ribs, or anything of that kind?

Mr. ETZLER. It is marked on some of the carcasses; yes, sir. The cattle we get from Chicago, that is what we call hot weighed. The bullock is shoved over on the scales and the hot weight is put on. When it cools it will shrink possibly 4 or 5 pounds to the carcass.

The CHAIRMAN. Not more than that?

Mr. ETZLER. No, sir.

The CHAIRMAN. I supposed it would.

Mr. ETZLER. No, sir. The Kansas City cattle shrink a little more. They will probably lose 6 or 7 pounds.

The CHAIRMAN. That mark, then, is put on in Chicago?

Mr. ETZLER. It is put on wherever the carcass is killed; yes, sir.

The CHAIRMAN. And you weigh it yourself and verify it?

Mr. ETZLER. Yes, sir.

The CHAIRMAN. And then it is weighed over at the hospital?

Mr. ETZLER. Yes, sir.

Mr. WALLACE. How is the shrinkage at Fort Worth?

Mr. ETZLER. It is greater there. The farther away the point is the greater the shrinkage is.

#### TESTIMONY OF DR. D. K. SHUTE.

Dr. D. K. SHUTE, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor Shute, are you a practicing physician here?

Doctor SHUTE. Yes, sir.

The CHAIRMAN. Have you resided here and practiced medicine here for a number of years?

Doctor SHUTE. Yes sir; for about twenty years.

The CHAIRMAN. Have you had occasion to go to St. Elizabeth's Hospital?

Doctor SHUTE. I have. I am the consulting oculist of that institution. I have been over there once a week quite often.

The CHAIRMAN. Do you still occupy that position? Do you go over there now?

Doctor SHUTE. Yes, sir. I have not been over recently, though.

The CHAIRMAN. What have you to say, from your observation, relative to the institution and the care of the patients?

Doctor SHUTE. Well, sir, it has always impressed me as being an institution managed with great care and judgment and skill. I have been through every part of the institution, as far as the inmates are concerned, and it has certainly always impressed me as being very tidy, and the patients seem to have been managed with care, judgment, and skill. I may state that in my capacity as visiting physician to the United States jail I have had occasion to send over to St. Elizabeth's from that place some 12 or 15 insane patients, and they frequently turn up at the jail again. They uniformly express great pleasure at the treatment they have had there. They are mostly poor colored people.

The CHAIRMAN. Do you know anything about the food there?

Doctor SHUTE. Yes, sir; I have been through the kitchen, and it impressed me as being very superior food for an institution that required service to such a large number of people daily. I thought it was wholesome, nutritious, and very good.

The CHAIRMAN. Do you know anything about other large institutions, Doctor?

Doctor SHUTE. I am connected with the United States jail.

The CHAIRMAN. Have you ever visited other large institutions for the insane?

Doctor SHUTE. Simply as a student—Blockley, of Philadelphia, and Blackwells Island, New York.

The CHAIRMAN. You say as a student. That has been twenty years ago?

Doctor SHUTE. Yes.

The CHAIRMAN. And the treatment of the insane has greatly improved in that time, has it not?

Doctor SHUTE. Yes, sir; but I have kept in touch with it. I think Doctor White manages the place in a most skillful and judicious manner. I have the highest opinion of Doctor White, both as a man

of honor and as a skillful alienist. I think he has every desire and intention to manage the place exclusively in the interest of the patients.

The CHAIRMAN. What do you say relative to the medical staff, other than Doctor White?

Doctor SHUTE. I do not see how it could be improved upon. I know them all personally. I have been brought in contact with them frequently, and I think they are all able, skillful men. I do not think that I exaggerate in the slightest in making that statement.

The CHAIRMAN. I suppose you must have come in contact with many of the attendants and nurses?

Doctor SHUTE. I have come in contact with quite a number of the nurses; yes, sir. I have known a number of the nurses personally.

The CHAIRMAN. Do they seem to you to be of a proper kind to nurse these people?

Doctor SHUTE. They certainly do, sir. I never saw any reason for complaint.

The CHAIRMAN. I think that is all, Doctor.

Doctor SHUTE. May I make a statement, Mr. Chairman?

The CHAIRMAN. Certainly you may.

Doctor SHUTE. I want to say that I introduced in the regular medical society recently a resolution that Doctor White be elected, by invitation, a member of that society. It is an unusual honor, and it was carried unanimously. I think it proper to state that that resolution was introduced because a large number of the members of the regular medical society of the District felt that Doctor White had recently been treated very unjustly by the charges being brought against him by a society the membership of which was anonymous; and his election to membership in the regular medical society by this unusual method was in the nature of a protest against these charges and an expression of confidence in Doctor White as an able man and a conscientious man in the administration of that institution. I make that statement because I myself introduced the resolution.

Mr. WALLACE. Doctor, did you expect to come before this committee?

Doctor SHUTE. I did not, sir. I had not the slightest idea that I would be called.

#### TESTIMONY OF DR. CORNELIUS DE WEESE.

Dr. CORNELIUS DE WEESE, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you a practicing physician here in the city?

Doctor DE WEESE. No, sir.

The CHAIRMAN. Are you connected with St. Elizabeth's?

Doctor DE WEESE. No, sir; I am not at present. I am medical director of the Laurel Sanitarium, at Laurel, Md., at present. I resigned from the institution here a year ago. I was connected with it for five years.

The CHAIRMAN. How large an institution is this sanitarium with which you are connected now?

Doctor DE WEESE. The capacity is 30. It is limited to 30. We have 15 patients there at present—nervous and mental cases only.

The CHAIRMAN. Have you, in the course of your professional work, visited other institutions of a similar character to that of St. Elizabeth's?

Doctor DE WEESE. Yes, sir; I was connected with the Maryland Hospital for six years as assistant physician.

The CHAIRMAN. How large an institution is that?

Doctor DE WEESE. They have about 600 patients now.

The CHAIRMAN. Is that an institution for insane patients?

Doctor DE WEESE. Yes, sir; it is a State institution.

The CHAIRMAN. How do those two institutions compare, as far as the treatment of patients is concerned, with the institution here?

Doctor DE WEESE. I think the Government hospital compares favorably with any institution of the kind that I have been connected with or have visited.

The CHAIRMAN. Have you visited other large institutions?

Doctor DE WEESE. Yes; I have visited all the State institutions of Pennsylvania and Maryland and many of the private ones.

The CHAIRMAN. Have you seen any of the large institutions in New York?

Doctor DE WEESE. No, sir; I have not.

The CHAIRMAN. Or in Ohio?

Doctor DE WEESE. No, sir.

The CHAIRMAN. When you were at St. Elizabeth's were charges of ill-treatment on the part of attendants toward patients reported to you frequently?

Doctor DE WEESE. No, sir; I have heard of a few cases over there.

The CHAIRMAN. Did you ever personally have to investigate any of these cases?

Doctor DE WEESE. No; I did not, sir.

The CHAIRMAN. Do you know of any specific cases that you can speak of or that you know of from your connection with St. Elizabeth's?

Doctor DE WEESE. No, sir; I can not recall any. Of course they are constantly coming up in every institution.

The CHAIRMAN. Do patients sometimes make charges that are entirely unfounded, in your opinion?

Doctor DE WEESE. Oh, yes; there is no doubt about that, sir. Yes, sir; they do. There are many imaginary cases, you know. That is a very common thing in an institution for the insane.

The CHAIRMAN. That is common among insane people?

Doctor DE WEESE. It is; decidedly so. They have delusions of persecution. They nearly all have them. They think they are being persecuted by one person or another.

The CHAIRMAN. Do they sometimes feel that way toward a doctor, a nurse, or other patients, as well as toward attendants?

Doctor DE WEESE. Well, it is nearly always to the head of the institution—nearly always. They think they are directly responsible for all their troubles.

The CHAIRMAN. In this Maryland institution with which you were connected, this State hospital, how large is the medical staff there?

Doctor DE WEESE. They have six physicians. That constituted the medical staff there.

The CHAIRMAN. Did the head medical officer of that institution



visit the several wards more frequently than Doctor White did, or was that left to the assistants largely?

Doctor DE WEESE. Well, I think he did. The institution is smaller, and it was possible for him to get around more.

The CHAIRMAN. How often was Doctor White in the habit of going to the department that you were connected with here in St. Elizabeth's?

Doctor DE WEESE. I think that he visited the various departments about once a week. He acts as general inspector of the whole hospital.

The CHAIRMAN. He is a man of considerable activity, is he not?

Doctor DE WEESE. He certainly is a very remarkable man. He accomplishes a great deal of work in a short time.

The CHAIRMAN. What do you think about the food connected with the institution, Doctor?

Doctor DE WEESE. As compared with other institutions, I think it is very good indeed. I must say that it is, I think, better than the Maryland hospital. Of course some of the other institutions—private institutions—probably are able to give a few more delicacies, but in general I should say the food supply was very good indeed.

The CHAIRMAN. Do you think the food is as nourishing as they get in a private institution?

Doctor DE WEESE. Well, it is, perhaps, as substantial, but whether it is gotten up in any fancy way—I think it is not. I think it is rather plain, generally speaking, but nutritious and very good.

The CHAIRMAN. From your experience, do you think it would be better if the business management of an institution such as St. Elizabeth's should be in one person's hands and the medical management in another one?

Doctor DE WEESE. Well, I hardly see how that could exist, and have things continue in an even way in the hospital. I think it is necessary to have a head to every institution.

The CHAIRMAN. You think there would be a clash of authority, you mean?

Doctor DE WEESE. I certainly do; yes, sir. I have never seen it tried in the State of Maryland. The superintendent, who is the medical man, has full charge. He directs the entire institution.

The CHAIRMAN. Does he have the same control over the appropriation that is made by the State of Maryland, as Doctor White has over the appropriation made for this hospital?

Doctor DE WEESE. I think he has about the same relation to the appropriation.

The CHAIRMAN. Is that, so far as you know, either by direct observation or by reading, the case in most of the large institutions?

Doctor DE WEESE. I think it is; yes, sir. It is so. The superintendent simply recommends.

#### TESTIMONY OF MISS EMMA BUTLER.

Miss EMMA BUTLER, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you an employee in the hospital now?

Miss BUTLER. I am.

The CHAIRMAN. How long have you been there?

MISS BUTLER. I have been there since 1885.

The CHAIRMAN. What are your duties?

MISS BUTLER. I am in charge of one of the wards in C building, a hospital ward.

The CHAIRMAN. What do you think in regard to the treatment of patients over there?

MISS BUTLER. Well, I think we give them the best treatment we can. We do all we can.

The CHAIRMAN. Are the supplies of all kinds satisfactory?

MISS BUTLER. Yes, sir; so far as I know, they are.

The CHAIRMAN. Your patients being in a hospital ward, have special diet, I presume?

MISS BUTLER. The sick ones have. They all fare very much alike.

The CHAIRMAN. How many patients are there under you?

MISS BUTLER. There are 26.

The CHAIRMAN. And how many attendants and nurses?

MISS BUTLER. We have three.

The CHAIRMAN. Are all of them nurses?

MISS BUTLER. Three of them are nurses for the day and one for the night.

The CHAIRMAN. Are your patients disturbed patients, generally?

MISS BUTLER. Well, sometimes they are a little disturbed.

The CHAIRMAN. Have you ever had any occasion to make complaint in regard to the supply of food, or the treatment of patients, generally?

MISS BUTLER. No; sometimes we might have a little shortage of food, but that is reported, and we always get it. If we do not get enough it is always sent to us if we need it.

The CHAIRMAN. How often does Doctor White visit your department?

MISS BUTLER. I see him every Sunday.

The CHAIRMAN. How about the board of visitors? Do they often come to your ward?

MISS BUTLER. Yes; I have seen the board of visitors quite frequently.

The CHAIRMAN. That is on the occasion of their monthly meetings, usually?

MISS BUTLER. Yes; some come some months and some come others.

The CHAIRMAN. Do you think you have sufficient attendants for the care of your ward?

MISS BUTLER. I think so—as many as we ever have had.

Mr. HAY. How long have you had three?

MISS BUTLER. It just depends. If we have a special—

Mr. HAY. I mean how long has it been since you had the three on the ward?

MISS BUTLER. We have had three for about, I guess, three weeks. We have had a special case which needs a nurse all the time, and that is special.

Mr. HAY. Then, ordinarily, you only have two?

MISS BUTLER. Yes.

The committee, at 11.55 o'clock a. m., took a recess until 2 o'clock p. m.

## AFTER RECESS.

The committee reassembled at the expiration of the recess.

## TESTIMONY OF MISS MARY O'LEARY.

Miss MARY O'LEARY, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. You are employed in St. Elizabeth's, are you?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. How long have you been there?

Miss O'LEARY. About thirty years.

The CHAIRMAN. What position did you have when you first went there?

Miss O'LEARY. I went there to work in the general kitchen as a helper.

The CHAIRMAN. That was under Doctor Nichols, was it not?

Miss O'LEARY. Yes, sir. I was only there about a few months, when he went away.

The CHAIRMAN. Then you served under Doctor Richardson, Doctor Godding, and now under Doctor White?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. What are your present duties?

Miss O'LEARY. My present duties are that I have to visit the different kitchens and see that they have supplies that they need for the wards, and to have the orders made out—the vegetable and grocery and meat orders—and approve them.

The CHAIRMAN. Then you are practically the head supply clerk for all of the kitchens, are you not?

Miss O'LEARY. Yes, sir; practically.

The CHAIRMAN. Do you attend to notifying the storeroom of the supplies you need for the several kitchens?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. How many kitchens have you?

Miss O'LEARY. We have 12, altogether. There are 8 general kitchens.

The CHAIRMAN. You have 12 altogether?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. And the largest of those is the general kitchen, is it not?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Where is that situated?

Miss O'LEARY. That is situated about centrally of the grounds, not far from the old center building, right near the storeroom.

The CHAIRMAN. How many patients does that general kitchen cook for?

Miss O'LEARY. They cook for about 775 at present.

The CHAIRMAN. How many attendants does it cook for?

Miss O'LEARY. For the attendants and outside employees—we have outside employees—350.

The CHAIRMAN. So that general kitchen has to cook the food that is used by over 1,000 people?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. How do you perform your duties? Do you notify the storeroom as to how much you want?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Tell us, in your own manner, exactly what you do.

Miss O'LEARY. We make out the amount that we think we need for each kitchen and have it entered, and there is a duplicate order kept in the storeroom. The original is sent to each kitchen, and of course the people in charge of the kitchen take out the orders that they want, and we make them out on other orders to keep in the storeroom. Of course I visit those kitchens several times a week. If they run short of anything, they always let me know, and I try to get it for them.

The CHAIRMAN. That is, you get it from the storeroom?

Miss O'LEARY. Yes, sir; I get it from the storeroom, through these orders.

The CHAIRMAN. Do you sign the orders?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. In other words, you inform Mr.——

Miss O'LEARY. Mr. Harnish. He is the storekeeper.

The CHAIRMAN. You notify him that he is to deliver on the morning of every day such and such provisions?

Miss O'LEARY. Yes, sir, the groceries; and of course I make out the meat orders in the meat room.

The CHAIRMAN. You send your orders to the grocery room and to the meat room?

Miss O'LEARY. Yes, sir. We have a daily order for meat and vegetables, and we have grocery orders three times a week—Monday, Wednesday, and Friday.

The CHAIRMAN. Then on Monday you give orders to cover how many days?

Miss O'LEARY. We usually make out our orders on Saturday, and the goods are delivered on Monday morning. Then we get orders again on Tuesday, and the goods are delivered on Wednesday morning.

The CHAIRMAN. So that your Saturday order covers Sunday, Monday, and Tuesday?

Miss O'LEARY. Yes, sir; and our Friday order covers Saturday, Sunday, and Monday. Monday morning they make an issue of groceries—and vegetables and fruit the same way.

The CHAIRMAN. When you say groceries, you mean what are commonly called dry groceries?

Miss O'LEARY. I mean tea, coffee, sugar, butter, hominy, beans—whatever they have that we use in the storeroom.

The CHAIRMAN. How about fresh groceries?

Miss O'LEARY. The fresh vegetables—we make out that vegetable order every day. We get fresh vegetables every day. We have had spinach and kale, cabbage, lettuce, radishes, all the vegetables that are in season; and the same way with fresh fruits.

The CHAIRMAN. How do you know what vegetables there are in the way of fresh vegetables? Are you notified what vegetables have come over from the farm?

Miss O'LEARY. Yes, sir; they let me know.

The CHAIRMAN. They let you know what vegetables there are?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. And you say, "Send so many to the general kitchen, and so many to the other kitchens?"

Miss O'LEARY. Yes, sir.

The CHAIRMAN. And it is the same way with meats, is it?

Miss O'LEARY. It is the same way with the meats; yes, sir.

The CHAIRMAN. So that you really are superintendent of all the kitchens?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. You do not have anything to do with superintending the cooking, do you, but merely in getting the supplies?

Miss O'LEARY. I have to go around and look after it. The doctor expects me to go and make visits to the kitchens and see if the food is cooked properly, or if any complaints come in he expects me to look into the matter and have it made satisfactory.

The CHAIRMAN. So you are practically the boss of the kitchens?

Miss O'LEARY. Well, I suppose so.

The CHAIRMAN. And it is actually your duty to see that all the kitchens get as much as they need?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. The amounts that you order are dependent upon the number of patients there who have to be supplied—the number of people, I should say, because there are patients and attendants?

Miss O'LEARY. There are patients and attendants in all the buildings.

The CHAIRMAN. You have also, in the supervision of the kitchens, to see that the food is properly prepared?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. In other words, if there is any complaint against any particular kitchen that would come to you to investigate?

Miss O'LEARY. Yes, sir; and I always try whenever I hear of any of those complaints to remedy them—that is, if any of them will come and tell me.

The CHAIRMAN. When do you go on duty?

Miss O'LEARY. I usually go on duty, some mornings, at half past 6, and other mornings at half past 7.

The CHAIRMAN. You live there in the asylum?

Miss O'LEARY. In the place; yes, sir.

The CHAIRMAN. Where do you get your own meals?

Miss O'LEARY. I get mine in the dining room right near the general dining room, a small dining room that I think was opened under Doctor Godding, and when Doctor Richardson came there he still had the dining room as it was, and the same with Doctor White. The heads of the different departments all take their meals in this dining room.

The CHAIRMAN. How many are there who dine there?

Miss O'LEARY. There is about 22.

The CHAIRMAN. Do you have the same character of food that is given to the patients?

Miss O'LEARY. Yes, sir; it is all the same kind of food. Of course it might be prepared in a smaller quantity, but it is the same kind of food.

The CHAIRMAN. Of course when you prepare food in small quantities it would be a little better cooked, probably, than when it is prepared in large quantities?

Miss O'LEARY. Yes, sir; it is probably cooked better than when it is cooked in such large quantities.

The CHAIRMAN. But that is the only difference—that your food is prepared in smaller quantities?

Miss O'LEARY. That is all.

The CHAIRMAN. In other words, you get your food from the same source. The meat, fresh vegetables, and groceries you get from exactly the same storeroom that the same things are taken from for all the patients, do you not?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Have you ever had any occasion to make complaints yourself of the character of the meat that is furnished there?

Miss O'LEARY. Well, on several occasions the corned beef, if it would not be very good, we would report the matter to Mr. French and he would always send it back. It has always been sent back, and it is the same way with fish and poultry—the same way. We have had chickens come that were not very good and he would always return them.

The CHAIRMAN. So that when they come over to your department and you find that there is anything the matter with them, or when you hear from the cook in any particular kitchen that anything is the matter with the food, you send it back to Mr. French?

Miss O'LEARY. Yes, sir; and he always returns it. I always bring it back to him.

The CHAIRMAN. Do you think, generally speaking, that the meat that is supplied is good?

Miss O'LEARY. Well, yes, sir; all we get to serve is very good. I have never seen any meat that was not fit to be sent out. That is, the meat that has been cooked. Of course in its raw state we have had it to go back.

Mr. BARCHFELD. They complain that sometimes the meat is a little tough. Is that not true in almost every home?

Miss O'LEARY. Yes, sir.

Mr. BARCHFELD. You do not get the same meat every day; even from the same barrel?

Miss O'LEARY. No, sir. Of course we try to please all. Some of them will say "I would like to have my meat rare," and some will say "I would like to have mine well done," and if you cook it too done they complain of that. It is kind of hard to please them, but still, in our own home I know they have just the same thing to contend with. Here last week we had strawberry shortcake served to some of the wards, and one or two met me and said they wished we would have the berries cooked a little better than they were, that they didn't like the berries cooked in the shortcake, they wanted them cooked well done.

The CHAIRMAN. Do you mean that some of the patients told you that?

Miss O'LEARY. Well, one of the employees and one of the patients also.

The CHAIRMAN. Do the patients generally get strawberry shortcake, or sometimes?

Miss O'LEARY. Well, yes; we have served them. We have served a good many of the wards with strawberry shortcake. They have

fresh fruit when it is in season, and we always aim to serve the patients first before anybody else gets served.

The CHAIRMAN. What kind of fresh fruit do you have?

MISS O'LEARY. We get in the strawberry season, strawberries. We have strawberries, and now they are commencing to bring the blackberries in. Then we have peaches. Of course we try to serve them. We manage to get through the house once or twice a season with peaches.

The CHAIRMAN. You mean fresh peaches?

MISS O'LEARY. Fresh peaches; yes, sir. Then we get cantaloupes and watermelons and grapes. We have had any amount of grapes for them.

The CHAIRMAN. Did the grapes come from the farm?

MISS O'LEARY. Yes, sir; and they bought some.

The CHAIRMAN. They buy grapes, too, do they?

MISS O'LEARY. They buy a few, but most of them are raised on the place.

The CHAIRMAN. At the time of the grape season, when the grapes are ripe at the place, do you get plenty of them?

MISS O'LEARY. We get plenty of them, and then we serve them every night for supper; and in the season we take green grapes and make jelly out of them and preserve them to be used during the winter.

The CHAIRMAN. Do the general run of patients get preserves at supper frequently?

MISS O'LEARY. For the general diet we try to get through the house three or four times a season; but for the special diet we try to give them—well, a couple of times a week for special cases. We make the jelly, and we use that for jelly cake or dessert for the sick.

The CHAIRMAN. Do the patients generally, throughout the hospital, get cake frequently?

MISS O'LEARY. Every Sunday night they are served with cake.

The CHAIRMAN. It is pretty good cake, is it?

MISS O'LEARY. Yes, sir; it is very nice; and on Monday evening they have cinnamon bread, or yeast-powder biscuit with sauce, bread and butter and tea; and Tuesday night we usually make them hot rolls, and Wednesday night they have gingerbread with this sauce, and Thursday night we have hot buns and sauce and bread and butter, and Friday night they have fresh bread and butter and sauce, and Saturday it is the same way; Sunday night they have cake and sauce, bread and butter and tea. So they have cake every Sunday night. We give them cheese once a month. They all like their cheese.

The CHAIRMAN. How about the supplies like hominy and cereals? Do you give them oatmeal?

MISS O'LEARY. Yes, sir; we have oatmeal every morning for the hospital wards and for supper. For the general diet we have it twice a week. Monday mornings we usually have fried hominy and sausage—green sausage during the winter and smoked sausage in the warm weather. On Tuesday mornings we have oatmeal and sauce, or stewed fruit, and hot rolls and butter; and the workingmen always get meat, too. Wednesday morning we give them liver and bacon and potatoes, alternate weeks, and they have oatmeal, and then we give them baked hash for dinner, and change off on alternate weeks

for that. Then, Thursdays they have their boiled dinners. Thursday morning we give them baked beans and oatmeal.

The CHAIRMAN. How do you think the beans are?

Miss O'LEARY. I think the beans always seem to be very good.

The CHAIRMAN. How about the canned vegetables, like canned tomatoes?

Miss O'LEARY. Well, we have always found them very good, and if we should get any that were not they have always been sent back, and there has been others sent in return that were good.

The CHAIRMAN. Do you ever get complaints from the wards that there is not enough to eat?

Miss O'LEARY. No, sir. Whenever I have them, I have always tried to remedy the matter by increasing it; but we have not had any complaints recently. I see in the paper where they said we had increased the food since the investigation, but I have not done anything, only the same as I had always.

The CHAIRMAN. You have not made any change during this investigation?

Miss O'LEARY. No, sir.

The CHAIRMAN. Has the character of the food generally improved since you first went there to the hospital?

Miss O'LEARY. Well, yes, sir; I think it is better now than it has ever been. I think they have more varieties. When I first went there they did not begin to get hot meat but once a week. They got steak Tuesday and stew on Saturday for the house in general. They never got any hot meat; and the employees, they now get meat every night for supper, and they never got it before, only three times a week.

The CHAIRMAN. So the entire hospital—patients and attendants—have hot meat certainly once a day?

Miss O'LEARY. Twice a day. They do not get any cold meat in the morning for breakfast at all. All hot meat is served. At supper the employees get cold meat.

The CHAIRMAN. Do they have hash for breakfast frequently?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. How is the hash? Is it pretty good?

Miss O'LEARY. It is very good, yes, sir; and they have codfish cakes.

The CHAIRMAN. Miss O'Leary, how many different dietaries are there in the hospital?

Miss O'LEARY. We have the general diet and the employees' and the sick diet. Of course that is special diet and the first section.

The CHAIRMAN. What does the first section mean?

Miss O'LEARY. Doctor Richardson established that. It is in the front wards. They get dessert every day, and I believe he gave them chicken once a week; but they do not always get it, only every other week. He was the one that started that, and Doctor White has never changed it.

The CHAIRMAN. Who are the people in the front wards? I do not mean their names, but what character of people are they who get dessert every day?

Miss O'LEARY. They are parole patients, I suppose—pay patients. I don't know.



The CHAIRMAN. There is some change made in that way for the pay patients?

MISS O'LEARY. I couldn't really say whether they are pay patients or not, but I know they are on these front wards.

Mr. SMYSER. Are they army officers?

MISS O'LEARY. Yes, sir; and doctors.

The CHAIRMAN. But as far as the food that is supplied is concerned, it is exactly the same throughout the hospital?

MISS O'LEARY. Yes, sir.

The CHAIRMAN. I mean to say, the meat which you take for the hospital diet is taken from the general supply of meat?

MISS O'LEARY. Yes, sir.

The CHAIRMAN. Just as it is for the front-ward patients?

MISS O'LEARY. Yes, sir.

The CHAIRMAN. And the attendants' food?

MISS O'LEARY. It is all the same.

The CHAIRMAN. And the food for the general patients?

MISS O'LEARY. Yes, sir.

The CHAIRMAN. There is not any difference?

MISS O'LEARY. No, sir.

The CHAIRMAN. You do not give any better quality of stuff to one than to another?

MISS O'LEARY. No, sir. Of course, on these front wards, they do get a different cut of roasts, or meat the same way; but the hospital wards get the best.

The CHAIRMAN. But it all comes from the same stock of meat?

MISS O'LEARY. All the same; yes, sir. There is no difference in the meat; no, sir.

The CHAIRMAN. And from your experience there you think that generally speaking the meat is of good quality, do you not?

MISS O'LEARY. Yes, sir.

The CHAIRMAN. Do you think that with regard to the corned beef as well as of the fresh meat?

MISS O'LEARY. Of course there are a good many who do not like the corn beef, but the corn beef is very good. The majority of the people do not care for it. They would rather have fresh meat, but the corn beef is very good. They eat it at our table. We have sent it to the superintendent, and all these smaller dining rooms—the physicians' dining room. They get it once or twice a week.

The CHAIRMAN. What about ham and bacon?

MISS O'LEARY. The ham is very good. Mr. French tests that ham every day when he gets it, when the meat comes in, and if the bacon and ham is not what it should be he would send it back. I have seen him send the meat back many times.

The CHAIRMAN. So that after Mr. French has looked over the meat it is then sent over to you, and you look at it, do you not?

MISS O'LEARY. No, sir; only when it comes to the different kitchens; and if it should not be what it ought to be they will call my attention to it, and I always take it back to him and he returns it to the dealer; but we have not had that to contend with.

The CHAIRMAN. In other words, then, Mr. French first looks at it?

MISS O'LEARY. He receives it.

The CHAIRMAN. He first looks at the meat, and finds out whether it

is good. Then it is sent to the several kitchens, and the chief cook of each particular kitchen looks at it. Now, suppose the chief cook of one of the kitchens finds that some meat, in her opinion, is not good. Does she notify you?

Miss O'LEARY. Yes, sir; always.

The CHAIRMAN. What do you do then?

Miss O'LEARY. I always take it right back to Mr. French, and he sends it away, if it should happen that way.

The CHAIRMAN. Do you go right over there, or do they come to you?

Miss O'LEARY. No, sir; I always go with them and see for myself.

The CHAIRMAN. They come to you and tell you that some of the meat they have they do not think is good?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. And you go over then and examine it?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. And if you find the complaint is justified then you tell Mr. French and he takes the meat back?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. And do you do practically the same thing with the vegetables and with the fruits?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Do you often have to send back any of the fresh vegetables?

Miss O'LEARY. No, sir; we never have sent back any fresh vegetables.

The CHAIRMAN. I suppose if the fresh vegetables coming in should be bad they would throw away the bad part and use the good part, would they not?

Miss O'LEARY. Yes, sir; but we never have received any that was not what they ought to be.

The CHAIRMAN. Most of your fresh vegetables come from the farm, do they not?

Miss O'LEARY. Yes, sir; but they buy some.

The CHAIRMAN. Is the cabbage generally pretty good?

Miss O'LEARY. Very good; yes, sir.

The CHAIRMAN. And the kale?

Miss O'LEARY. The kale is always good; yes, sir.

The CHAIRMAN. Miss O'Leary, would you have the slightest hesitancy about making complaint of things, right up to headquarters, even to Doctor White, if you found any necessity for it?

Miss O'LEARY. No, sir; if there was anything that was not right I would make a report to the proper authorities. I have always tried to do that, and it would always be remedied.

The CHAIRMAN. You have found that they have always taken your statements when you have examined it?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Do they generally agree with you when they examine it with you?

Miss O'LEARY. Yes, sir; they have never said anything against it. I know a while ago we were getting rice that was not very good, and Mr. Sanger, I think, was called on about it. He can verify my statement. They sent it back, and it is the same way with dried fruit. I think we got some once that was not so good and it was returned.

That is the only time though that I know of anything like that to have been sent, except the canned tomatoes. We get them in the cans and there might be one or two in a box, but the groceryman has always sent back good ones in place of those that were returned.

The CHAIRMAN. How about the cooking? You have to supervise that, too, do you not?

Miss O'LEARY. Yes, sir; to a certain extent.

The CHAIRMAN. How many cooks have you under you?

Miss O'LEARY. We have about 35.

The CHAIRMAN. That is, there are about on an average three in each kitchen?

Miss O'LEARY. Yes, sir. Well, in the general kitchen we have eight. That is the larger kitchen.

The CHAIRMAN. Do you have a meat cook, and a vegetable cook, and a pastry cook, and cooks for different kinds of things?

Miss O'LEARY. No, sir; we have no pastry cook. We have a meat cook and the assistant vegetable cooks.

The CHAIRMAN. That is, in each one of the kitchens?

Miss O'LEARY. Yes, sir. In the small kitchens, the Richardson group, we have one cook and two helpers at one kitchen, and at the hospital ward we have two cooks and one helper. Of course their work is a little harder there. Then there is another kitchen, the Q, where they have only one cook and two helpers. In the Toner we have three cooks and five helpers. We have eight there altogether.

The CHAIRMAN. And besides these kitchens you have a bake shop, do you not?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Is all of the bread for the entire institution made in this one bakery?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. How many people are there employed in there?

Miss O'LEARY. There are five day bakers and two night bakers.

The CHAIRMAN. And you bake bread every day, do you not?

Miss O'LEARY. Yes, sir; and those night bakers, they bake rolls during the night for breakfast in the morning.

The CHAIRMAN. Did you ever have any complaint made about the bread at any time?

Miss O'LEARY. No, sir; we have not lately. We did have one employee that complained about the bread. He always said it was sour, but that is the only one. I have never heard anyone else complain. The bread is always very good.

The CHAIRMAN. There was one of the patients, you say, that spoke about it?

Miss O'LEARY. No, sir; one of the employees.

The CHAIRMAN. Did you investigate that?

Miss O'LEARY. Yes, sir; and there was nothing to it. The bread is all right.

The CHAIRMAN. Is that attendant still there?

Miss O'LEARY. No, sir.

The CHAIRMAN. Of course, I suppose you have more complaint from some kitchens than you do from others, do you not?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Do you generally have something to say about the employment of the particular cooks?

Miss O'LEARY. Well—

The CHAIRMAN. Are they sent to you, before they are regularly employed, so that you can question them?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. As to their knowledge about cooking?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Are most of your cooks white or colored?

Miss O'LEARY. They are mostly colored, and when they come they tell you that they can do a great deal, and after you get them—

The CHAIRMAN. I have heard of such things as that happening in private houses.

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Do most of them come from this vicinity?

Miss O'LEARY. Yes, sir; a good many of them come from Anacostia—Hillsdale, rather.

The CHAIRMAN. Have most of your cooks been there a considerable length of time?

Miss O'LEARY. Yes, sir; we have a good many that have been there eight or nine years, or ten years; and if I am not mistaken we have one that has been there sixteen years.

The CHAIRMAN. Are the wages that are paid over there at the asylum to cooks and kitchen maids and the various helpers in the kitchen better than they would be apt to get in private houses?

Miss O'LEARY. I can not say about the cooks. The helpers get very good pay, and the kitchen helpers get better pay now than they ever did over at the hospital.

The CHAIRMAN. Do most of the cooks live in the hospital?

Miss O'LEARY. No, sir; a good many of them go home. A part of them go home.

The CHAIRMAN. How is it with the helpers?

Miss O'LEARY. Well, they mostly stay. A good many of those stay at the hospital.

The CHAIRMAN. The cooks and helpers all have a right to stay, do they not?

Miss O'LEARY. If they want to, but of course they prefer going home.

The CHAIRMAN. That is a common feeling among colored help generally, is it not?

Miss O'LEARY. Yes, sir; they always want to be away at night.

The CHAIRMAN. In any kind of work, either in private houses or in hotel employment, the colored help almost always want to go away at night, do they not?

Miss O'LEARY. Yes, sir; always.

The CHAIRMAN. How many patients have you who assist in any of these kitchens?

Miss O'LEARY. Well, in the general kitchen I judge they have about ten. There are eight female patients that come up and help to prepare the vegetables, and there is one or two that help in all the other kitchens—that is, the Toner and the Q. Of course those out in the Richardson group—a male patient helps out there. He comes voluntarily.

The CHAIRMAN. What do these patients do? Do they peel potatoes and shell peas?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. And wash dishes and all that kind of thing?

Miss O'LEARY. One or two of them help to wash the dishes. Of course, if they do not want to do it they are not compelled to, but they rather like to do it. They often ask to be taken in the kitchen.

The CHAIRMAN. Do you find that some of them do fairly good work?

Miss O'LEARY. Yes, sir; they do very good work.

The CHAIRMAN. Were you ever employed anywhere before you went to St. Elizabeth's?

Miss O'LEARY. No, sir.

The CHAIRMAN. I did not suppose you were. I did not know that you had been there so long, anyway. Is there anything in the conduct of the kitchen, taking into consideration the number of people you have to provide for, as to which you could suggest any improvement?

Miss O'LEARY. In what way?

The CHAIRMAN. In any way. I mean, could you think of any improvements that might be made in the kitchen service there? I do not mean in the character, particularly, of the cooks. I suppose you get as good cooks as you can.

Miss O'LEARY. We try to.

The CHAIRMAN. I mean in the system. Do you think the system is as good as it could be, or could you suggest any improvement upon it?

Miss O'LEARY. Well, I don't think I could, Mr. Olcott. I think the system they have now is better than what we used to have to go through.

The CHAIRMAN. Do you mean that the improvement has been gradual ever since you went there? Have there been any particular changes made since Doctor White has been there in regard to the kitchen?

Miss O'LEARY. Of course the place is enlarged more since Doctor White came, and of course the patients are moved out. In the general kitchen they used to have about 1,800 or 1,900 to cook for, while by gradually putting those people over in smaller buildings, and having the food cooked separately, I think it is very much better.

The CHAIRMAN. In other words, they get the food hotter?

Miss O'LEARY. Very much hotter.

The CHAIRMAN. And better served?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. A great deal has been said in regard to the food after it has been put through these tunnels from one building to another being cold. How does the food leave the general kitchen, for instance?

Miss O'LEARY. The food is just as hot as it can be handled. You could not handle it without a towel to carry those dishes to the waiter. Of course the car man, the truck man, takes it to the waiters, and it goes through the waiter. Then, of course, the attendants have to serve it. Well, by the time they get around, if they have 30 or 40 people to serve—they dish it all up before they call the patients in—naturally the first plate will be a little colder than the last plate.

The CHAIRMAN. Is care taken to have the plates that they dish the food up on hot? Are these plates heated, or is the hot food put on cold plates in the serving room?

Miss O'LEARY. They are in the winter time. They have heaters where they set their plates. I know they have in some of the wards.

The CHAIRMAN. In other words, in some of the wards they have those steam tables that they put the food on?

Miss O'LEARY. Yes, sir; in some of the wards.

The CHAIRMAN. Do you think there is sufficient help in the kitchen?

Miss O'LEARY. Well, just about, now. Of course in vacation time the Doctor always gives us extra help during vacation. Otherwise, they get along very good, without some one is taken sick, or one or two of them; which sometimes has happened that way.

The CHAIRMAN. Are you responsible, as Superintendent, for the meals that are served to the doctors who live there, too?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. How much of a vacation do you get?

Miss O'LEARY. About eighteen days.

The CHAIRMAN. Eighteen days?

Miss O'LEARY. Yes, sir.

Mr. SMYSER. Do you know Mrs. Dean?

Miss O'LEARY. Yes, sir.

Mr. SMYSER. Do you know the dining room in which she eats?

Miss O'LEARY. Yes, sir.

Mr. SMYSER. What do you know about the meats served in that dining room within the last three weeks being tainted, so that they could not be eaten?

Miss O'LEARY. I don't think I could hardly believe it, because if she got it somebody else would have been very likely to have gotten it. Mrs. Dean told that she had spoken to some one in regard to the meals in the Toner Building. She has her first time to ever come to me to say a word about it; but one day I heard there was something—the potatoes or something was not cooked as thoroughly as they might be—and I sent for her and asked her if it was so. She said yes, that she had not had any dinner that day. Well, I said: "Mrs. Dean, why didn't you come and tell me about it?" She said: "Well, I didn't like to." I said: "In the future if anything goes wrong you come and let me know about it." She promised me that she would; but she has never come.

Mr. SMYSER. Has there been any complaint within a couple of weeks about the meat being in that condition—tainted?

Miss O'LEARY. I never have heard a word about it.

Mr. SMYSER. When did you first hear of it?

Miss O'LEARY. When I read it in the paper the other night.

Mr. SMYSER. Do you know how many people eat in that dining room?

Miss O'LEARY. Well, there are about 56, with the night nurses and all.

Mr. SMYSER. And you can not see how it would happen that she alone would get a piece of the tainted meat, if it was served there?

Miss O'LEARY. And no one else; no, sir. I should think that they would not hardly pick a piece out for her.

Mr. SMYSER. That would be a little curious. Have you heard complaints from the other people who eat there?

Miss O'LEARY. About the meat?

Mr. SMYSER. Yes.

Miss O'LEARY. No, sir; I have never heard a word. I did hear once that the meat was cooked a little too much for them. I asked them if they would not have some cooked a little rarer, and served half and half for them.

Mr. SMYSER. In your work of supervising there, are you reasonably careful to be as cleanly as possible?

Miss O'LEARY. Yes, sir; I try to be.

Mr. SMYSER. And you exact that from the cooks and everybody under your charge?

Miss O'LEARY. Everybody; yes, sir.

Mr. SMYSER. Did you ever see any cockroaches done up in the meals?

Miss O'LEARY. No, sir; we haven't any roaches. Of course there is waterbugs there, but very few of those. I have never seen any roaches, not at the hospital.

Mr. SMYSER. So that is a mistake, about cockroaches being served. You say you haven't got any there?

Miss O'LEARY. I have never seen any.

Mr. SMYSER. You have water bugs?

Miss O'LEARY. Yes, sir.

Mr. SMYSER. Well, that will happen.

Miss O'LEARY. Yes, sir; they have those in private residences, smaller houses. We have very few of those.

The CHAIRMAN. Miss O'Leary, Miss Agnes Staples testified that "the food would be good if it was properly cooked, but we have very poor cooking in the dining room where I am." Do you know what dining room she was connected with?

Miss O'LEARY. Yes, sir; I think she is in the K building.

The CHAIRMAN. Did you ever have any particular complaint from her in regard to this?

Miss O'LEARY. No, sir; I have never heard any complaint from Miss Staples about the food. One time I think there was some trouble about coffee.

The CHAIRMAN. Yes; and she talked about sugar.

Miss O'LEARY. The sugar? Now, of course, sometimes they have every two weeks an issue of sugar. Well, they have been getting along very well with that amount. They have been getting along all right until the berry season started, and naturally of course we use more sugar for berries than we would if we didn't have any berries.

The CHAIRMAN. Do you use the same kind of sugar for the coffee and tea that you use for the berries?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. It is granulated sugar, I suppose?

Miss O'LEARY. Granulated; yes, sir.

The CHAIRMAN. The coffee and tea are made in the several buildings where they take their meals, are they not?

Miss O'LEARY. There is four buildings where they make their tea and coffee.

The CHAIRMAN. Is some of the tea and coffee made in the general kitchen?

Miss O'LEARY. Oh, yes; that is made in the general kitchen.

The CHAIRMAN. How do you send that? Do you send it in these push carts on which you take the food around?

Miss O'LEARY. It is sent in 4-gallon size cans. The milk and sugar is always put in it before it leaves the kitchen.

The CHAIRMAN. What kind of cans are they; are they like milk cans?

Miss O'LEARY. Yes, sir; about that high [indicating]. They are about 4-gallon size.

The CHAIRMAN. And the milk and sugar are put in, so that it is all ready to pour into the cups when it gets into the several dining rooms?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Is there any difference made in any of the buildings or wards as to the service of prunes?

Miss O'LEARY. No, sir; they all get them for supper, all through—the employees, patients, hospital wards, and all.

The CHAIRMAN. Are they pretty good prunes?

Miss O'LEARY. Yes, sir; I always found them very good.

The CHAIRMAN. You eat the same kind yourself, do you, in your dining room?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. Did you ever have any trouble or complaint in regard to the potatoes not being done?

Miss O'LEARY. Not being well done?

The CHAIRMAN. Not being well done; yes.

Miss O'LEARY. No, sir; I have not had any lately. I can not recall any time.

The CHAIRMAN. Of course potatoes are served every day to everybody, are they not?

Miss O'LEARY. Yes, sir; every day. No; some days for the general diet we often take the stale bread and make batter cakes out of it, and a good many of the patients seem to enjoy it. I have been in the dining rooms and the supervisors have told me that they all enjoyed them very well. So we have them with the boiled dinners some days. We always serve fresh vegetables when we can get them—in the season, of course.

The CHAIRMAN. In season you always have plenty of fresh vegetables?

Miss O'LEARY. Yes, sir; we always do.

The CHAIRMAN. Do you have fresh tomatoes frequently?

Miss O'LEARY. Yes, sir.

The CHAIRMAN. They raise those on the farm, do they not?

Miss O'LEARY. They raise those on the farm; yes, sir.

The CHAIRMAN. How about the new potatoes; have you begun to use new potatoes yet?

Miss O'LEARY. No, sir; we have not; not yet.

The CHAIRMAN. You wait for those until they come over from the farm, I suppose?

Miss O'LEARY. Well, we buy them, and then, of course, they commence bringing them in from the farm about the 1st of July.

The CHAIRMAN. Miss Staples said in her testimony that the potatoes were never done.

O'LEARY. She has never reported it. I never heard it.



The CHAIRMAN. You never heard any complaint from her?

MISS O'LEARY. No, sir. I don't believe she would know if they were done if she seen them.

The CHAIRMAN. I think that is all I wish to ask.

Mr. WALLACE. How are you designated on the pay roll?

MISS O'LEARY. I think as chef.

Mr. WALLACE. Not as housekeeper, or anything of that kind?

MISS O'LEARY. No, sir.

Mr. WALLACE. How many kitchens do you have to look after?

MISS O'LEARY. There is 12 on the place, but I have to visit 10.

Mr. WALLACE. What is your salary—your pay?

MISS O'LEARY. I get \$780 a year.

Mr. WALLACE. Has your pay been reduced?

MISS O'LEARY. Well, it was, a while ago; but, of course, I suppose the superintendent he only give it to me—he didn't say I was to keep the salary. He only give me the \$70, and then he taken \$5, but I didn't know for what reason. Of course he didn't give it to me but for just the time being, for what work I was doing.

Mr. WALLACE. Your wages were reduced, then, under Doctor White's administration?

MISS O'LEARY. I was getting \$55 when he came there, and Doctor White gave me—it was about two years ago—he gave me \$70. That was \$15 raise. Of course somebody did the work then, and I suppose he thought he would take the \$5 off; but he told me when he was giving it to me that it would only be temporary.

Mr. WALLACE. It was reduced how much?

MISS O'LEARY. \$5.

Mr. WALLACE. \$5 a month?

MISS O'LEARY. Yes, sir.

Mr. WALLACE. Have you more things to look after now than you had before?

MISS O'LEARY. Well, to a certain extent, I have; but then I had a general kitchen at that time, so he relieved me of that and gave it to another lady. He gave her charge of the general kitchen.

Mr. WALLACE. How do your duties now compare with what they were then?

MISS O'LEARY. Well, of course it keeps me busy all day long, but I manage to get through with it.

Mr. WALLACE. Did the other work keep you busy all day long?

MISS O'LEARY. Yes, sir.

Mr. WALLACE. Did Mr. French ever insist on your using tainted meat, or beef, or bad eggs after you discovered they were bad?

MISS O'LEARY. No, sir, for I wouldn't do it.

Mr. WALLACE. I did not ask you if you would. I asked you if he ever urged you to use it.

MISS O'LEARY. No, sir.

Mr. WALLACE. Do you know what Mr. French's duties are there?

MISS O'LEARY. Well, I think his duties are receiving the meats and looking after the vegetables. Outside of that I couldn't say.

Mr. WALLACE. Do you know how many hours during the day he is employed?

MISS O'LEARY. Well, he is there all day.

Mr. WALLACE. Is he busy all day?

Miss O'LEARY. Practically so.

Mr. WALLACE. Does he help you, or is it intended that he shall help you in your work?

Miss O'LEARY. Well, he never helps me in any of my work. Of course I have never called on him to.

Mr. WALLACE. Is it not part of his business to assist you? Is it incumbent upon him in his position to assist you in your work to some extent?

Miss O'LEARY. I suppose it would be if I should ask him. I think that is what the superintendent expects of him.

Mr. WALLACE. But he does not help you?

Miss O'LEARY. No, sir; I have never called on him to.

Mr. WALLACE. Do you know anything about the oranges and bananas purchased over there? Do you know what is done with them?

Miss O'LEARY. Well, whenever there is any oranges or bananas being purchased we always have sent some to the officers' table and the wards. We always share with them. We never have kept any separately.

Mr. WALLACE. Do you have them for patients and attendants?

Miss O'LEARY. We always send them to the hospital wards, whatever is purchased—fresh vegetables or fruit.

Mr. WALLACE. You spoke awhile ago of your thinking there was an improvement in the food supply there. Did you once have fruits in addition to what you are getting now—fruits of various kinds?

Miss O'LEARY. Fruit?

Mr. WALLACE. Yes.

Miss O'LEARY. Yes; we used to get oranges and bananas.

Mr. WALLACE. Has that been cut off?

Miss O'LEARY. We don't get them any more.

Mr. WALLACE. That has not been a distinct improvement in that particular, has it?

Miss O'LEARY. I say in the cooking. I did not say in purchasing fruits.

Mr. WALLACE. Are the employees fed according to the position they hold? Are they classified there in any way? Do they get different kinds of food? I am speaking about the employees now.

Miss O'LEARY. About the employees—they get a little different from the patients; yes, sir.

Mr. WALLACE. Can you give any reason why complaints have been made there about the food?

Miss O'LEARY. No, sir.

Mr. WALLACE. What report was made to you by Miss Spencer as to an assault that had been made upon her, and what did you do?

Miss O'LEARY. Mabel Spencer?

Mr. WALLACE. Yes.

Miss O'LEARY. She came to me and told me about this night watchman molesting her on the grounds. I reported the matter to the superintendent, and he sent for her, and they investigated it. I think the night watchman was put off of duty, and Miss Mabel Spencer, I think she stayed away on a number of times and never gave any very reasonable excuse, and so the last time she stayed away—I think three or four days—and I went to the superintendent and reported the matter to him and told him that we had to have

somebody; that it was compulsory to have the work done. He told me I could fill her place.

Mr. WALLACE. You had a good deal more work to do then, did you?

Miss O'LEARY. What?

Mr. WALLACE. You had a good deal more work to do? I mean, was there any more work put on Mabel Spencer after that?

Miss O'LEARY. No, sir; we filled her place. Oh, you mean after she got in this trouble?

Mr. WALLACE. Yes.

Miss O'LEARY. No, sir.

Mr. WALLACE. How many grades of food are cooked there?

Miss O'LEARY. How many grades?

Mr. WALLACE. How many grades? You say there is some difference.

Miss O'LEARY. In what department?

Mr. WALLACE. That is what I am trying to find out. In all the departments—how many grades of food are cooked?

Miss O'LEARY. There is the sick diet. That is special diet. Then the employees' and the general diet and the first section and the officers' cooking. Of course they have a cook that does their cooking for them. That is all of the same quality.

Mr. WALLACE. Do you know anything about the officers' meals, the superintendent, doctors, etc.?

Miss O'LEARY. Yes, sir.

Mr. WALLACE. How is their food, as compared with the others?

Miss O'LEARY. They get the same quality. Of course the cooking in small quantities, I suppose, is a little better than it is in the large quantity.

Mr. SMYSER. If there is any difference, it is in the cooking, is it?

Miss O'LEARY. No, sir.

Mr. SMYSER. I say, if there is any difference in the food, it is in the cooking?

Miss O'LEARY. Yes, sir; the food is all of the same quality.

The CHAIRMAN. In other words, if you cook for a dozen people you would naturally get better results than if you cook for a thousand people? Is not that it?

Miss O'LEARY. Yes, sir.

Mr. WALLACE. Does that great number there have anything to do with the good meals the doctors get? The doctors would get good food regardless of the numbers that were cooked for?

Miss O'LEARY. The doctors.

Mr. WALLACE. Yes.

Miss O'LEARY. Yes, sir; I think they would. Of course, where you cook for 25 or 30 people it makes quite a difference from where you cook for 100 or 200.

Mr. WALLACE. There is a special cook, I believe you said, for the officers and doctors?

Miss O'LEARY. She is a colored woman that we learned on that work. She just came in as a helper.

Mr. WALLACE. She does not cook for those several hundred others, does she, outside of the officers?

Miss O'LEARY. No, sir; I say she was a helper that learned about the work. She came in there first as a helper.

## TESTIMONY OF MONIE SANGER.

MONIE SANGER, having been first duly sworn, was examined and testified as follows:

The CHAIRMAN. You are connected with St. Elizabeth's, are you not?

Mr. SANGER. Yes, sir.

The CHAIRMAN. What is your position?

Mr. SANGER. My official title is that of storekeeper.

The CHAIRMAN. Mr. Sanger, how long have you held that position?

Mr. SANGER. I have held that position since October 11, 1905.

The CHAIRMAN. How long had you been in the hospital before you were given that position?

Mr. SANGER. That day. That was the position I went over there to accept.

The CHAIRMAN. Where had you been before that?

Mr. SANGER. I had been at Woodward & Lothrop's department store.

The CHAIRMAN. Well, had you had experience in this former occupation that was of the same character as your present position to some extent?

Mr. SANGER. Well, I was chief of the sales auditing department there, and I had experience in statistics of all sorts, by having extra work outside, through putting in systems in grocery stores, undertaking establishments, as well as disbursing organizations of all sorts. I took the civil-service examination for something else, but I was certified to this position, and took charge of the storeroom as storekeeper, intending to do my work in an official line as storekeeper, having subs under me who would be responsible for the class of goods we handled, the idea being that my attention would be called to it if any of the things were not up to date, and I could then find out if things were not exactly right, and we could then economize and get things in better shape.

The CHAIRMAN. Where did you take your civil-service examination?

Mr. SANGER. I took the examination in the civil-service department for another position. It was a two-day examination, eight hours each day; for the reclamation service.

The CHAIRMAN. Under the Department of the Interior?

Mr. SANGER. Oh, yes, sir. That was for a \$2,000 position, but it was filled by some one else.

The CHAIRMAN. What do you get at the hospital?

Mr. SANGER. I get \$1,500.

The CHAIRMAN. What are your duties?

Mr. SANGER. As I say, I am storekeeper. That is my title, and under that title I am bonded for all kinds of stores that come to that institution, and I am myself responsible. I also have to receive and make disbursements. While I do not see them all, I try, as far as possible, to handle the matter approximately as it would be handled in the store where I came from. There each buyer could not be responsible, nor could the owner be responsible, for all the classes of stuff, nor could he see it; but somebody under him would, and his

attention would be called to it if there was anything wrong, and he could examine it. I do it there in that manner.

The CHAIRMAN. How many men have you under you?

Mr. SANGER. Indirectly, there are—

The CHAIRMAN. I mean directly connected with the storeroom.

Mr. SANGER. There is Mr. Harnish and Mr. Cropp in the store proper; then there is Miss Quaid up in the dry-goods department, and Mr. Ham in the office. While indirectly, as far as the supplies are concerned, I suppose Mr. French has to work in conjunction with me, so I am responsible for the orders that come through my hands.

The CHAIRMAN. Are you responsible for the supplies of every kind that go to the hospital?

Mr. SANGER. No; at present they have no central receiving station; but I am for all classes of food, dry goods, and things of that sort.

The CHAIRMAN. What about china?

Mr. SANGER. China? I am responsible for that.

The CHAIRMAN. And kitchen utensils?

Mr. SANGER. All that I am responsible for.

The CHAIRMAN. You spoke of dry goods. Do you mean clothing?

Mr. SANGER. Clothing.

The CHAIRMAN. Clothing and bed linen?

Mr. SANGER. Yes; and cottons and everything of that sort that is in the store. There is some one else in charge of different departments, but of course we work in conjunction and cooperate and see that it is received properly and disbursed properly.

The CHAIRMAN. Have you anything to do with the inspection of food products that come in?

Mr. SANGER. Merely through my assistant, and if there is anything wrong he calls my attention to it, and I often get it and see if it is wrong; and if it is, I see that it is returned. I have done that on several occasions. Mr. Harnish has called my attention to different things, rice and dried fruit and other things, and I have sent them back.

The CHAIRMAN. Do you have any difficulty with the people you deal with in regard to receiving back the goods that are returned?

Mr. SANGER. No; it is very easy to get them accepted. Sometimes, if it is the second occasion, we have had letters written saying that we can not stand for it, and that things of that sort would not be received, and that it was a great deal of trouble to receive an article and have to return it, and they have always accepted it and given us better in place of it.

The CHAIRMAN. You say that this particular position of superintendent of the storeroom was created by Doctor White?

Mr. SANGER. There was a storekeeper previously, but the storekeeper previously did not pretend to do the same class of work I do. In conjunction with that, furthermore, I have tried to introduce a system, and perfect it, not only to keep things running properly in that way, but I have also introduced a cost system in the industrial department, to see that we are doing it in such a way as not to lose, and also to see, if we are doing anything in such a way as to lose, if we can stop it and make something else, and making a saving by purchasing that article.

For instance, we have incorporated a system in connection with the bakery so that we can tell how much it costs to make each roll and

each loaf of bread and things of that sort. We have put that system into effect, and now each baker knows that he must account for every barrel of flour, and for every pound, and in that way we are able to keep down the expenses. It is the same in the sewing rooms, the paint shop, the tin shop, the mattress shop, and the dairy. I hope to install a system in connection with every department. I can probably tell you in regard to my duties by giving you a conversation that I had, when I first went there, with Doctor White.

The CHAIRMAN. Go ahead and tell us about it.

Mr. SANGER. He called me over and said that he had been there then, I think about two years. He said he had covered pretty thoroughly the whole institution with the exception of the storeroom, which was at that time not to his satisfaction. He said the expenses continued to increase, and the system apparently was not perfect. He wanted some one in charge of it who could take charge of it and keep proper track of the various goods and see that there was nothing wasted; that according to the number of supplies that were coming out there was apparently waste. We then got a dietary statement, I think originated by August Flint, of Bloomingdale—

The CHAIRMAN. Austin Flint.

Mr. SANGER. Austin Flint. That was afterwards used by the various New York State hospitals. We used that as a basis, and after making out a list of what we charged to each kitchen we figured it out per capita and tried to reduce it in such manner as to compare favorably with that—allowing, probably, some extras on account of the different class of patients that we had. After we had used that for awhile he then told me that he wanted me to inaugurate a system and see if we could not find out the cost to the various departments; that the classifications to some extent were bad, old fashioned, and he wanted to keep it up to the best standard he could get.

He warned me at once in regard to my language and behavior and told me of the sensitive nature of the people there, saying that that was one thing he would not brook; and not only that, but that anybody who hurt a patient would be prosecuted to the full extent of the law. He asked me to try and visit the various industrial departments, including the sewing rooms, the bakery, the laundry, and other places, to take note of the different expenses and see from a statistical point of view whether they were all proper or whether they could be reduced without injuring the service to any extent. The same applied to the food products and to dry goods, etc.

To work in conjunction with me he appointed a matron who was to visit the various wards, observe the clothing, and see before any was condemned and new supplied whether they could not be repaired—in other words, to run it on business principles. Lots of stuff was condemned previously that could possibly have been repaired, and I think that has resulted in a great saving to the institution. You find a feeling among a good many people to the effect that, "Oh, this is Uncle Sam's, and it doesn't matter." They had a good deal of that to contend with.

I have here a statement giving a comparison of the sugar used in the Government Hospital for the Insane and the New York State hospitals. I will read that if you wish.

The CHAIRMAN. We would be glad to have you.

Mr. SANGER. It is as follows:

## SUGAR.

**Manhattan State Hospital, New York :**

Average number of patients.....	4,300
Total amount of sugar used.....pounds..	232,089
Average cost per capita.....	\$2.8063
Average consumption per capita per day.....ounces..	1.99

**Central Islip State Hospital, New York :**

Average number of patients.....	3,622
Total amount of sugar used.....pounds..	186,640
Average cost per capita.....	\$2.7146
Average consumption per capita per day.....ounces..	2.26

**Government Hospital for the Insane :**

Average number of patients.....	2,500
Total amount of sugar used.....pounds..	307,268
Average cost per capita.....	\$5.666
Average consumption per capita per day.....ounces..	4.22

That was for the past year.

Mr. SMYER. What is the consumption?

Mr. SANGER. The consumption is 4.22 ounces per day per capita.

The CHAIRMAN. For 1905?

Mr. SANGER. For last year. In introducing our system we have reduced that somewhat during the last few months to about 3.08 ounces on account of the preserving and the strawberry season; it was a little over 4—about 4. So you see even that was quite as large as the consumption at the New York State Hospital. Of course the reduction has a tendency to cause complaint. It is very easy to increase to any amount, but if you reduce the slightest particle there is complaint.

The CHAIRMAN. Your duties then are largely to go over the entire supply of food and the materials used in the hospital, to systematize the delivery of it, and to see whether any saving of money can be had. Is that it, largely?

Mr. SANGER. That is part of it; yes, sir. It is the same way in the industrial department. It is my duty to go over the various industrial departments, to inaugurate systems, and to keep proper track and see that the various portions of the industrial departments—the manufacturing part—is doing its work as economically as possible. It may be that there are certain things made in the tin department, for instance, small things that orders come in for, that can be purchased in the 5 and 10 cent stores, and it would be better to get them outside. At the same time we can make other things there which possibly would cost us a good deal more outside.

The CHAIRMAN. Do you live in the hospital grounds?

Mr. SANGER. No, sir. I take lunch there every day. Maintenance was permitted me when the offer came for the position. I received a letter offering me the position, and they said that maintenance was included.

The CHAIRMAN. You do not get any additional pay because you do not take it, do you?

Mr. SANGER. No, sir. When I went and asked for that I told the Superintendent that I preferred to live at home and asked that very thing. He said he had no authority to permit anything of the sort, but of course I took into consideration the fact that I would have early hours there, and opportunities for study, and of course I wanted to take advantage of it.

The CHAIRMAN. What are your hours?

Mr. SANGER. From 9 o'clock until 4.15 or 4.30. I get there at about a quarter to 9 and leave about 4.15.

Mr. WALLACE. Referring to the statement you have read, where did you get that information?

Mr. SANGER. I got it from the last annual reports of those hospitals.

Mr. WALLACE. You have not those reports with you?

Mr. SANGER. I think I have. [Producing a document.] This is the Central Islip Report, I think. You will find here the amount of sugar and the per capita.

Mr. WALLACE. Do they have fresh fruit in those hospitals?

Mr. SANGER. It does not say very much about it, you notice, in this statistical list.

Mr. WALLACE. How many hours are you occupied there? Is your time fully occupied?

Mr. SANGER. The whole time I am there. I do not devote my full time to mechanical labor. I do not think it is intended that I should; but a good deal of my time is occupied in observing these various industrial departments, seeking information in the various places to see what method I can introduce in the nature of statistics which will lessen the expenses and economize properly.

Mr. WALLACE. How many hours do your duties require you to be there at the hospital?

Mr. SANGER. From 9 until 4.30. I am a civil-service appointee, and I have the same hours that Government employees in the Departments have.

Mr. WALLACE. Seven and a half hours?

Mr. SANGER. Yes, sir.

Mr. WALLACE. Have you been at this trial constantly?

Mr. SANGER. No; but I have been here on several occasions.

Mr. WALLACE. How many times have you been here?

Mr. SANGER. I could not tell you. It was mostly preliminary, while Doctor White was on the stand; I had information that I had assisted in preparing, and I thought I might be of use here.

Mr. WALLACE. Did anybody fill your place then?

Mr. SANGER. No; but if there was anything that it was actually necessary to attend to I was there on Sunday on several occasions to keep my work up. Also, I have stayed on several occasions after hours when it was necessary to keep my work up.

Mr. WALLACE. Were you attending to your duties while you were attending this trial?

Mr. SANGER. I should think it was part of my duty. It seems to me an investigation of this sort in connection with the hospital would require my presence. In the first place—

Mr. WALLACE. Have you attended without being summoned?

Mr. SANGER. I have attended at the direction of the superintendent.

Mr. WALLACE. Without a summons?

Mr. SANGER. I was summoned to-day.

Mr. WALLACE. But you were not summoned when you were here before, at the times you speak of?

Mr. SANGER. I was directed to be here by my chief.

Mr. WALLACE. What was the aggregate of the pay roll of the entire storehouse when you took charge?



Mr. SANGER. I couldn't tell you. There were several vacancies there. I can tell you for the last four years, though, if you would like it. For the year ending June 30, 1903, it was \$3,134, and there are several more people now, and they were getting maintenance in addition; for the year ending June 30, 1904, \$3,813.29, and several of those secured maintenance in addition; for the year ending last June, June 30, 1905, it was \$2,815, and some were getting maintenance in addition. This year it is \$2,908.33; but I am not securing maintenance. I only get one meal a day, so that it is not a fair comparison. About my duties, I am at the storeroom after hours a great deal, and my time is fully filled.

Mr. WALLACE. What do you say the aggregate is now?

Mr. SANGER. The total amount drawn for the last year is \$2,968.33; that is, it will be if everybody there draws pay for the full month.

Mr. WALLACE. Does that include Mrs. Swan?

Mr. SANGER. Mrs. Swan is not connected with the store. She is a marker, who marks all the goods, and for years she was in another portion of the place, but to save rehandling the goods, in taking them from the storeroom to the other buildings to be marked, and sending them back and forth, we thought it better to bring it to the store and mark it there. The handling and rehandling may cause considerable loss.

Mr. WALLACE. Her pay is not included?

Mr. SANGER. Her pay is not included, nor was it ever.

Mr. WALLACE. How much is she paid? Do you know?

Mr. SANGER. I do not know.

Mr. WALLACE. Is Mrs. O'Brien's pay included in that statement?

Mr. SANGER. It is not. Mrs. O'Brien is the matron of the place. She may look after it partly, as I say. Some years previous Mr. Pratt was the dietician, and filled a similar position in trying to economize, but since he left there has been no one there. I would like to say also that when Mr. Barry was in charge of the store he had his wife also employed there, and his two children, and they all had maintenance there. Of course, as I believe it was figured before, the maintenance of three people would be \$650 a year, or \$50 a month. That makes quite a difference.

Mr. WALLACE. How much pay does Mrs. O'Brien get? Do you know?

Mr. SANGER. I do not know whether it is \$720 or \$780.

Mr. WALLACE. According to your statement, have you not saved the institution several thousands of dollars in this department—

Mr. SANGER. I think I have—a good many thousands of dollars.

Mr. WALLACE. How long have you been there?

Mr. SANGER. About eight months.

Mr. WALLACE. How do you account for the pay roll being larger and the same number of persons employed, yet you do not use as much?

Mr. SANGER. The pay roll being larger, yet we do not use as much?

Mr. WALLACE. Yes.

Mr. SANGER. By preventing waste.

Mr. WALLACE. In what particular?

Mr. SANGER. In all particulars. A good many people go on the principle that it is coming from Uncle Sam, and if it is torn they will

throw the thing away and get new. Now we are more careful with things of that sort, and if it is possible to repair an article we do not get new stuff. In previous times, if they had some tin article that had a little bit of a hole in it, they would throw it away and get a new one. Now we send it to the tin shop and get it repaired. In numerous ways we look after things of that sort and see that there is no waste.

Mr. WALLACE. Do you sell any on the outside?

Mr. SANGER. Do I sell any?

Mr. WALLACE. Yes.

Mr. SANGER. Oh, no. I am not a salesman.

Mr. WALLACE. Is there any selling to outsiders there of stores?

Mr. SMYSER. Any what?

Mr. WALLACE. I asked him do they sell anything on the outside?

Mr. SANGER. From our store?

Mr. WALLACE. Yes.

Mr. SANGER. No; we do not do anything of the sort. We have a Government institution there, for the employees and patients.

Mr. WALLACE. That is what I wanted to know.

Mr. SANGER. Oh, no.

Mr. WALLACE. Have you at any time made a report to the superintendent showing an itemized statement in full of receipts and disbursements of the farm which resulted in a gain or profit of \$9,000?

Mr. SANGER. I believe a copy of that report was exhibited here. While that was a profit of \$9,000, we do not pretend to say it was an actual profit from the farm. That was made in comparison with the Central State Hospital of Virginia, which we were compared to. The farm was credited with everything it produced, and then a charge was made for the use of teams, etc., and also for fertilizer and the value of manure. The actual value could not be arrived at in that manner. It was given in comparison, and in the same manner as the Central State Hospital of Virginia figured it in their report, and it shows, on that basis, a profit of some \$9,000, but in reality if we had taken the actual value of the stuff it would be a great deal more than that, because of the commercial value of the milk—

Mr. WALLACE. What I asked you was if you recall having at any time made a report to the superintendent showing that? I mean an itemized statement.

Mr. SANGER. I made a statement for use in this investigation.

Mr. WALLACE. Have you made a report to the superintendent?

Mr. SANGER. I made it for his use in this investigation.

Mr. WALLACE. And nothing else?

Mr. SANGER. That is all. I was not there a year ago, and could not have made it.

Mr. WALLACE. You did not make the statement to him in the ordinary course of your duties at the asylum?

Mr. SANGER. I was not there a year ago, and could not have made it.

Mr. WALLACE. You just made this statement?

Mr. SANGER. I compiled it for his benefit.

Mr. WALLACE. Can you furnish this committee, or will you send, a detailed statement verifying such statement?

Mr. SANGER. I think there is a copy here.

Mr. WALLACE. You think it is already here?

Mr. SANGER. I think it is already in the records.

Mr. WALLACE. In the record of his testimony?

Mr. SANGER. Yes, sir; Doctor White's testimony.

Mr. WALLACE. This statement I have been asking about—the profit of \$9,000?

Mr. SANGER. I would like to read a short extract. While that statement showed a profit of \$9,000, it should really have been \$19,000, on account of the milk being worth more. I would like to read an extract from the report of the Michigan Hospital for the Insane, if you will permit me.

Mr. SMYSER. We do not care for that. Give us your reasons for saying it ought to be \$19,000 instead of \$9,000.

Mr. SANGER. Because the milk was figured on a basis of 18 cents a gallon, but milk from a tuberculin-tested herd, on experiment, is worth 28 cents a gallon. There are three such herds in this vicinity. One at the Soldiers' Home, one owned by a man named Powers, and ours. Our veterinarian certifies that he was present when Mr. Powers refused 34½ cents, and the experiment station at the Wisconsin College says it is worth 28 cents.

Mr. SMYSER. Oh, cut across lots. What you mean is, you think you did not figure the milk high enough?

Mr. SANGER. I figured it on the ordinary milk purchases here.

Mr. SMYSER. You did not go high enough?

Mr. SANGER. No.

Mr. SMYSER. 10 cents a gallon?

Mr. SANGER. 10 cents a gallon.

Mr. SMYSER. What else enters into this \$10,000?

Mr. SANGER. It should be \$10,000 more—92,000 at 10 cents; a little over \$9,000.

Mr. SMYSER. And that alone?

Mr. SANGER. That one item alone.

Mr. WALLACE. You figured it at 18 cents?

Mr. SANGER. 18 cents, in my statistics. My value of the farm produce was a little bit larger than the figures of the Medico-Legal Society, but I am willing to take their statement about it.

Mr. WALLACE. It has been stated before the committee by Mr. Green that the farm did not produce enough provender for the stock. Is that so?

Mr. SANGER. I dare say it is.

Mr. WALLACE. You think that it did not produce enough for the stock?

Mr. SANGER. I dare say that it did not. I was not there last year, and I do not know.

Mr. WALLACE. How are you designated on the pay roll?

Mr. SANGER. As storekeeper; that is the position I was certified to fill.

Mr. WALLACE. What is your pay?

Mr. SANGER. \$1,500.

Mr. WALLACE. A year?

Mr. SANGER. Yes.

Mr. WALLACE. Part of the duties performed by you, Mrs. O'Brien, and Miss Quaid at present, were solely the duty of one person prior to your appointment, were they not?

Mr. SANGER. They may have been temporarily, for a short time; but at one time there was a man and his wife over there, and Mrs.

O'Brien. She still looks after the sewing room, the way it is there now, as part of her duties. She is the matron in charge of the whole hospital, and works in cooperation with me, to economize.

Mr. WALLACE. Did you not recommend to the superintendent the reduction in pay in Mr. Harnish's case?

Mr. SANGER. No, sir; I understand that that was thought of long before I went there; so if I had not gone there someone else would have been given my position, and it would have had the same effect.

Mr. WALLACE. Do you have charge of the workroom?

Mr. SANGER. In cooperating with Mrs. O'Brien, as I say.

Mr. WALLACE. What portion of time do you spend in those rooms?

Mr. SANGER. I could not say what portion of the time. I make periodical visits, now and then.

Mr. WALLACE. Do you know how many sewing machines are being operated at this time?

Mr. SANGER. In the workrooms? I think there are about nine.

Mr. WALLACE. Are they of the rotary or oscillating type?

Mr. SANGER. I don't know.

Mr. WALLACE. Your contract calls for 7-pound white blankets. Do you get that?

Mr. SANGER. I guess I do. I depend a good deal for that on my people who are under me. I can not pretend to see everything myself.

Mr. WALLACE. If you should accept a lighter blanket than that provided for in the contract, would the merchant putting in the bids be given a square deal?

Mr. SANGER. If we would accept a lighter blanket?

Mr. WALLACE. Yes.

Mr. SANGER. You mean if the blanket is not up to the contract?

Mr. WALLACE. Yes.

Mr. SANGER. I do not admit that it is not up to the contract, absolutely not. The merchant would not be given a fair deal if we would accept it, but I do not admit anything of that sort.

Mr. WALLACE. Perhaps you do not know. That is what I wanted to ask you about—if such a thing was done, would it be fair?

Mr. SANGER. It would not be. That is a fact, necessarily.

Mr. WALLACE. Somebody else might have an idea that that was done.

Mr. SMYSER. I would like to ask you one question: You think that your position there saves something to the institution?

Mr. SANGER. I believe it has saved to the institution. Since I have been out there I have been compiling a monthly list of the various articles used this year and last year from the various storerooms of which I have charge. I know there has been quite a saving every month.

Mr. SMYSER. How much of a saving?

Mr. SANGER. For the six months ending last April there was a saving of \$14,000 to \$15,000, and it has been in the same ratio since then.

Mr. SMYSER. Your function there is to do that which every successful business has to do—to cut off, lop off, unnecessary expenditures and waste?

Mr. SANGER. Yes, sir. We are working on the same basis as we

would work in a commercial house. It is on a business basis all the way through.

Mr. SMYSER. You think you are saving something to the Government?

Mr. SANGER. I believe so, and I believe that I have convinced the superintendent to the same effect.

Mr. SMYSER. Of course, the salary in sight would induce you to lead him to believe that?

Mr. SANGER. Yes, but if you will excuse me, the salary I receive now I hope some day to exceed either there or at some other place. I am working for my own interest, of course, as well as for the interest of the Government.

Mr. SMYSER. That is, you are trying to make yourself valuable?

Mr. SANGER. I am. While I am working in behalf of the institution, it is an education, and I also increase that education outside.

#### TESTIMONY OF MISS LUCY SMITH.

Miss LUCY SMITH, having been first duly sworn, was examined and testified as follows:

The CHAIRMAN. Miss Smith, are you employed in St. Elizabeth's?

Miss SMITH. Yes, sir.

The CHAIRMAN. What is your position there?

Miss SMITH. I am a chambermaid.

The CHAIRMAN. In what part of the institution are you? In what building?

Miss SMITH. In the Administration Building.

The CHAIRMAN. What are your duties?

Miss SMITH. What is that?

The CHAIRMAN. What are your duties? How many rooms do you have to take care of?

Miss SMITH. About 7.

The CHAIRMAN. Are they large rooms which accommodate a number of patients, or small rooms?

Miss SMITH. I have the internes, and the matron, and clerks.

The CHAIRMAN. Do you know Mrs. Dean?

Miss SMITH. Yes, sir.

The CHAIRMAN. Mrs. Dean testified that she was employed in the sewing room and had been for five years; that she takes one meal a day at the hospital. She says the meat and vegetables served to the employees of the sewing room are very poor; that the food is not properly cooked, and that the meat is often served when it is spoiled, and the meat is not fit to eat. What have you to say about that?

Miss SMITH. I say it is not so. I take three meals there to-day, and I find them very good, and I eat at the same table she does.

The CHAIRMAN. Have you ever had occasion to complain of the character of the meat?

Miss SMITH. No, sir; I never had any occasion to. I always found everything very good.

The CHAIRMAN. How long have you been in the hospital?

Miss SMITH. Since 1901.

The CHAIRMAN. Is the food now as good as it was under the previous superintendent?

MISS SMITH. I think in a way it is better. We get more variety.

THE CHAIRMAN. Do some of the patients assist you in cleaning up the rooms you have charge of?

MISS SMITH. No, sir.

THE CHAIRMAN. None at all?

MISS SMITH. No, sir.

THE CHAIRMAN. Did you ever hear Mrs. Dean complain of the meals?

MISS SMITH. She is a chronic growler. That is the whole truth about it.

MR. SMYSER. A what?

THE CHAIRMAN. She says Mrs. Dean is a chronic growler.

MR. SMYSER. Well, you do run across them occasionally, even in Ohio.

MR. WALLACE. Whom did you say was a chronic growler?

MISS SMITH. Mrs. Dean.

MR. WALLACE. She is a married lady?

MISS SMITH. Yes, sir.

MR. WALLACE. You live at the hospital, and get your maintenance there?

MISS SMITH. Yes, sir.

MR. SMYSER. You say you eat at the same dining table with Mrs. Dean?

MISS SMITH. Yes.

MR. SMYSER. How about a couple of weeks ago, having meat that you had to spit out, because it was tainted and you couldn't eat it?

MISS SMITH. It is not so.

MR. SMYSER. That is not true?

MISS SMITH. No, sir; if it was so I would hear of it, because I eat at the same table.

MR. SMYSER. Has any such thing happened there within two months?

MISS SMITH. No, sir.

MR. SMYSER. Can you imagine how we have happened to get such a story here?

MISS SMITH. I don't know. I know it is not true.

MR. SMYSER. You know it is not true?

MISS SMITH. No; it is not.

MR. SMYSER. Did you ever hear of it before you heard it in the testimony here?

MISS SMITH. No, sir.

MR. WALLACE. Are you always at the table at the same time with Mrs. Dean?

MISS SMYTH. Yes; pretty much. She might get there ahead of me, five minutes ahead of me or something like that; but we have the same food.

MR. WALLACE. If she gets there ahead of you you are not together, then, are you?

MISS SMITH. The meal is supposed to be served at 12 o'clock and she may get there at ten or fifteen minutes before 12.

MR. WALLACE. So it is possible that she may have received this food before you got there?

MISS SMITH. No; or some of the other girls would have said something about it.

Mr. SMYSER. Mr. Chairman, I would like to ask Mr. Sanger a few questions.

The CHAIRMAN. Certainly.

#### ADDITIONAL TESTIMONY OF MONIE SANGER.

MONIE SANGER, having been heretofore sworn, resumed the witness stand and testified as follows:

Mr. SMYSER. This paper that I hand you is a comparative statement of the New York hospital and the hospital out here.

Mr. SANGER. It is a comparative statement of the New York State hospitals with the Government Hospital for the Insane. It includes all of the New York State hospitals for the insane, combined, an average being struck.

Mr. SMYSER. I would like to have that put in the record.

Mr. WALLACE. Is that the same statement you had awhile ago?

Mr. SANGER. No, sir; that is different.

Mr. SMYSER. I think that would be of interest to all of us.

The CHAIRMAN. I have no objection, unless it is shown that New York is unduly extravagant. [Laughter.]

Mr. WALLACE. Where did you get this?

Mr. SANGER. It is the statement of the New York board of lunacy, is it not?

The CHAIRMAN. The annual report of the commissioner of lunacy. I have it here.

Mr. SMYSER. In your statement you have taken all of the hospitals of New York State?

Mr. SANGER. Yes.

Mr. WALLACE. You have aggregated them, and have then taken the average?

Mr. SANGER. Yes.

Mr. SMYSER. You divided that by the number of hospitals and got the average. Is that it?

Mr. SANGER. Yes.

Mr. SMYSER. And then you have given what you find it to be at the Government hospital?

Mr. SANGER. Yes.

The statements referred to in the testimony of Mr. Sanger are as follows:

*Statement showing per capita comparisons between New York State hospitals and Government Hospital for the Insane.*

#### PAY ROLL.

	New York State.	Government Hospital for Insane.
Superintendent, staff, and general offices.....	\$16.90	\$14.12
Ward service .....	35.87	40.39
Domestic service.....	8.23	14.98
Engineer department.....	7.15	8.51
Laundry service .....	1.85	4.73
Farm, grounds, and buildings.....	6.29	36.05
Total.....	76.29	118.78

*Statement showing per capita comparisons between New York State hospitals and Government Hospital for the Insane—Continued.*

## OTHER EXPENSES.

	New York State.	Government Hospital for Insane.
Subsistence, house furnishings, bedding, furniture, and fuel.....	\$82.81	\$111.23
Clothing.....	6.06	11.33
Ordinary repairs.....	4.31	33.45
Farm and garden.....	3.85	10.92
Books and stationery.....	1.07	1.68
Medical supplies.....	1.09	2.66
Miscellaneous (including transportation).....	6.23	1.91
Total.....	105.41	173.18
	76.29	118.78
Fresh and salt meats, poultry, and fish.....	181.70	291.96
	17.06	26.08

In the figures for the Government Hospital for the Insane are included the appropriations for extraordinary repairs, buildings, and grounds. This explains the high per capita of the following items: Pay roll, farm, grounds, and buildings; subsistence, house furnishings, bedding, and fuel; ordinary repairs; farm and garden.

*Statement showing per capita comparisons between Manhattan State Hospital and Government Hospital for the Insane.*

	Manhattan State Hospital.	Government Hospital for Insane.
Coal.....	\$10.179	\$21.182
Fresh meats.....	12.34	14.60
Poultry, etc.....	.611	1.762
Tea.....	1.472	1.22
Coffee.....	1.466	2.468
Sugar.....	2.80	5.78
Flour.....	7.09	7.08

## TESTIMONY OF MISS FLORENCE CASWELL.

Miss FLORENCE CASWELL, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you employed over at St. Elizabeth's?

Miss CASWELL. Yes, sir.

The CHAIRMAN. How long have you been there?

Miss CASWELL. Since 1889. I left there for two years.

The CHAIRMAN. What is your position there?

Miss CASWELL. I am a seamstress.

The CHAIRMAN. You eat at the same table with Mrs. Dean?

Miss CASWELL. Yes, sir.

The CHAIRMAN. How many meals a day do you take?

Miss CASWELL. Three; sometimes two on Sunday.

The CHAIRMAN. Do you live at the hospital?

Miss CASWELL. Yes, sir.

The CHAIRMAN. What have you to say of the food?

Miss CASWELL. I say that it is just as good as it could be in a place



of the kind, in as large a place as it is. It is better than it used to be in former days. It is warmer.

The CHAIRMAN. Have you heard Mrs. Dean complain of it?

Miss CASWELL. No, sir; I couldn't say that I ever heard her complain until I saw in the newspaper where she made these charges.

The CHAIRMAN. Did you have a talk with her about it after that?

Miss CASWELL. No, sir; I have not.

The CHAIRMAN. Have you ever known of any occasion where the meat was so bad that the odor of it was foul?

Miss CASWELL. No, sir; I have not; and I never heard anyone else say so.

The CHAIRMAN. Mrs. Dean said the food was so bad that she couldn't work on three meals a day at that institution, and she was obliged to take something at home before she went to work. Do you think that is a just criticism of the food at that place?

Miss CASWELL. No, sir; I do not.

The CHAIRMAN. You have been living there since 1889?

Miss CASWELL. Yes, and I have never had any occasion to make any complaints at all.

The CHAIRMAN. Do you get enough food?

Miss CASWELL. Yes, sir; a plenty.

The CHAIRMAN. What do you think of the meals served under Doctor Richardson as compared with those served under Doctor White?

Miss CASWELL. I think they are better now, because they are warmer than they used to be when they came from the general kitchen through the tunnel.

The CHAIRMAN. The room where you are employed now has a kitchen in that building?

Miss CASWELL. Yes, sir.

Mr. WALLACE. Are you at the same table with Mrs. Dean?

Miss CASWELL. Yes, sir; almost opposite to her.

Mr. WALLACE. You two ladies?

Miss CASWELL. Yes, sir.

Mr. WALLACE. I believe you say you never heard Mrs. Dean complain?

Miss CASWELL. No, sir; I never heard any complaint until I saw her statement in the paper.

Mr. WALLACE. She did not make an impression on you, then, that she was a chronic growler?

Miss CASWELL. Oh, I have heard her complain at the table; she never made any complaint to me.

Mr. WALLACE. I understood you to say that you never heard her complain.

Miss CASWELL. I say, never to me; but she has at the table.

Mr. WALLACE. What did she kick about, or growl about, as the term goes?

Miss CASWELL. She complained of anything that anybody else wouldn't see anything to complain of, as a general thing.

Mr. WALLACE. Did she complain about the food, as a general thing?

Miss CASWELL. Not the food in general. I don't know what she would complain about. She would make different remarks about it.

Mr. WALLACE. Was she the only growler out there?

Miss CASWELL. The only one I know of.

Mr. WALLACE. Were you always at the table when Mrs. Dean was there?

Miss CASWELL. I always went there with her.

Mr. WALLACE. You went there with her and came away with her?

Miss CASWELL. Yes; I sat right opposite to her.

The CHAIRMAN. Miss Caswell, have you been in the employ of the hospital continuously ever since 1889?

Miss CASWELL. No; I was away two years taking care of a private patient, and I was away two years waiting on my parents just previous to their death, and I returned there the third time; so it is not a dreadful place, or I wouldn't have wanted to go back so many times.

#### TESTIMONY OF C. P. MACK.

C. P. MACK, having been duly sworn, was examined and testified as follows:

Mr. SMYSER. Mr. Mack, where are you employed?

Mr. MACK. I am employed at the office of the register of wills.

Mr. SMYSER. Here in the city?

Mr. MACK. Yes.

Mr. SMYSER. What is that package of papers you have there?

Mr. MACK. They are guardianship papers.

Mr. SMYSER. In what case?

Mr. MACK. In the case of Frank Briggs.

Mr. SMYSER. Who was he?

Mr. MACK. He was a patient at the insane asylum.

Mr. SMYSER. St. Elizabeth's?

Mr. MACK. Yes.

Mr. SMYSER. Who is his guardian?

Mr. MACK. His guardian is Mary M. Lendner.

Mr. SMYSER. Is she his mother?

Mr. MACK. Yes.

Mr. SMYSER. Where does she live?

Mr. MACK. I don't know.

Mr. SMYSER. Would you have any trouble over there to find out where she is?

Mr. MACK. Those papers are new to me, and I have not looked over them very much.

Mr. SMYSER. I see a couple of citations in there.

Mr. MACK. Yes; they never got her to render an account.

Mr. SMYSER. How long has your court been trying to get an account rendered in that case?

Mr. MACK. Since 1893, I think, or 1894.

Mr. SMYSER. Do you know who her attorney is, by the way?

Mr. MACK. The attorney was—it tells on here. It is Richard P. Evans.

Mr. SMYSER. Do you know who it is that has been so solicitous about having a rendition of an account and asking for citations?

Mr. MACK. Yes, sir.

Mr. SMYSER. Who?

Mr. MACK. It is the Interior Department.

Mr. SMYSER. The Pension Bureau of the Interior Department?

Mr. MACK. The Pension Bureau of the Interior Department.

Mr. SMYSER. You have not been able to get an account from that lady as yet?

Mr. MACK. No, sir.

The CHAIRMAN. I would like to have those papers marked in some way or identified.

Mr. MACK. The papers have a number—guardianship 1641. (Papers on file in office of Register of Wills, District of Columbia.)

#### TESTIMONY OF DR. ALFRED GLASSCOCK.

Dr. ALFRED GLASSCOCK, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. How long have you been at the hospital?

Doctor GLASSCOCK. Three years and about three months. I went there April 1, 1903.

The CHAIRMAN. You have been there since April, 1903?

Doctor GLASSCOCK. Since April, 1903; a little over three years.

The CHAIRMAN. Did you go there as the result of a civil-service examination?

Doctor GLASSCOCK. I went there as a result of a civil-service examination.

The CHAIRMAN. What was your position when you first entered the hospital?

Doctor GLASSCOCK. I was a medical interne.

The CHAIRMAN. What are you now?

Doctor GLASSCOCK. I am junior assistant physician.

The CHAIRMAN. What building are you connected with?

Doctor GLASSCOCK. I assist Doctor Stack in the male receiving department—the white male receiving department.

The CHAIRMAN. How long have you been junior assistant under Doctor Stack?

Doctor GLASSCOCK. I have been junior assistant under Doctor Stack for a year, but I was acting junior assistant for nearly a year before that time, until I received the full appointment.

The CHAIRMAN. You were then in the same portion of the institution?

Doctor GLASSCOCK. I was in the same portion of the institution, and have been in this portion for two years. Prior to that I was interne in the chronic department, the detached buildings. I was an interne with the older class of men—old soldiers, etc.—in a different part of the institution.

The CHAIRMAN. How many men are under your supervision?

Doctor GLASSCOCK. At present there are, I think, 460. That is the number to-day, I believe.

The CHAIRMAN. Do you go through all the wards every day?

Doctor GLASSCOCK. I go through all the wards every day, as a rule, but I occasionally miss a day in going through the chronic part of the department; but as to the B Building, which is the hospital ward, the receiving ward, I go through every ward in that building twice a day. I go through the main ward of that building as many as a dozen or two dozen times a day. I am in and out all day long. My rooms are in that building, and I have to go back and forth through my rooms, and I see a great deal of the patients then. I go back and forth to the Administration Building, which adjoins that building, all

the time, and I go through the main hospital ward. I am in and out all day long. Then at one time during the day I visit the whole of our department. Of course, occasionally I miss a day. I may be making the rounds, and go up to the top ward of the building. Then I may get a call for a new patient, and have to go there to admit him, and do not come back again; so that some of the wards I do not get through every day.

The CHAIRMAN. Are there any wards there that you have anything to do with that are not visited every day by either you or Doctor Stack?

Doctor GLASSCOCK. No; there are no wards that we are not supposed to visit, and do not try to visit every day. Occasionally we miss a ward. There are some wards in which nearly all the patients are paroled, and we see those patients about the grounds nearly all day long. Frequently, in going through those wards, we find all the patients are out—not only the parole patients, but the two or three remaining patients are out on the grounds with the attendants; and the consequence is, that there being no one in the ward, when I go through, the attendants do not know that I have been there.

From about 9 o'clock in the morning, generally, all the patients are out until nearly 12 o'clock. The attendants then prepare their meals, and soon after dinner, as soon as the patients are washed and the wards have been straightened out, they go out on the grounds again and remain until nearly 4 o'clock, and then the wards are empty. I frequently have occasion to go to one ward—it may be Dawes 3, in the old department, on the top floor. I may have occasion to go there to see one of the patients, and then I make the round through the whole department, and I may find five or six of the wards vacant, and I do not go through those.

The CHAIRMAN. Is there a hospital ward connected with your department?

Doctor GLASSCOCK. Yes; the B building has four wards which are really hospital wards, and it has now another ward, the Retreat 1, where at present we have 39 bedridden old men, aged and infirm men. They are all bedridden. There are 39 on that ward, which is really a hospital ward, outside of the four hospital wards we have.

The CHAIRMAN. Do you get to those wards every day?

Doctor GLASSCOCK. I go twice a day, and sometimes more frequently than that.

The CHAIRMAN. What do you think of the nurses and attendants under you, generally speaking?

Doctor GLASSCOCK. I think, generally speaking, they are very good nurses and attendants.

The CHAIRMAN. How many are there?

Doctor GLASSCOCK. We have 55 day attendants and nurses, including 4 female nurses, and we have 10 night attendants and nurses, so that we have 65, besides 2 bath attendants who have charge of giving the patients baths. That is 2 extra, and then we have waitresses who wait on the patients in my hospital building.

The CHAIRMAN. Do you think you have sufficient attendants there?

Doctor GLASSCOCK. I think we have.

The CHAIRMAN. Do you frequently have complaints in regard to any of the attendants or nurses?

Doctor GLASSCOCK. I have not known of any genuine complaints

until I heard of them in the papers quite recently. I did not know that such marked disturbances were going on there until I saw it in the paper recently.

The CHAIRMAN. You do not think there are any now, do you?

Doctor GLASSCOCK. I do not think there are now.

The CHAIRMAN. Have you patients who are so disturbed under your control that you have to order this camisole put on them sometimes?

Doctor GLASSCOCK. We have. That occurs quite frequently.

The CHAIRMAN. Why do you do that?

Doctor GLASSCOCK. We do it as a matter of protection for that patient. I think in a great many instances it is impossible to do without restraint. I have seen patients who, when they were admitted to the institution, would batter themselves about, knock themselves against the wall and floor. They had no clear idea of their position or environment. They were, in a way, unconscious and regardless of their surroundings. Consequently they would make an impulsive run toward the wall, and they would be liable to butt their heads against the wall. In those instances restraint is the only way to prevent them from either killing themselves or killing those with whom they come in contact, or injuring them severely.

The CHAIRMAN. Did you ever know or would you have confidence in the possibility of that mechanical contrivance being used for purposes of vindictiveness or punishment to the patient for something he has done?

Doctor GLASSCOCK. No, sir.

The CHAIRMAN. You use it to protect the patient from himself?

Doctor GLASSCOCK. Yes, sir; to protect him from himself and to prevent him from harming others.

The CHAIRMAN. What do you know about the Percy Echols case?

Doctor GLASSCOCK. I am pretty familiar with the circumstances of his case. I remember admitting the patient when he first came to the institution. I think he was in the institution about sixteen months. He was a paretic, suffering from general paralysis—paresis, as we call it. I remember that his mental disturbance was quite pronounced. He had delusions of persecution.

He had a delusion that his very best friend had gone back on him and robbed him of a large sum of money. He had delusions that his relatives were against him and were trying to poison him. He did very well for a few months, and then it was noticed that he was becoming quite restless. I remember the first report about him, which showed that the deterioration was progressing so rapidly that one night he began to throw neckties and shoes out of the window. Then it was found that he had been picking up various articles, trash, and concealing them in bed, under his pillow. Then he became quite disturbed and broke out the glass, and he was sent to Gray Ash ward, where we kept the more disturbed class of patients. On Gray Ash ward he got worse. He became exceedingly impulsive in his actions. He was depressed and he had the idea that he was dead.

He said he was dead when he was walking about and eating three meals a day. He became untidy in his habits and at the same time very irritable. Then we noticed that he was becoming unsteady in his gait. By that time the new B building was opened and he was admitted to the B building. Soon after that he had to be put in bed,

because he was totally incapable of getting about. He was liable to fall at any time. Soon after being admitted to the B building he began to break glass and furniture. You would see him sitting down in a chair and suddenly he would jump up and push over the settee, or try to jump over another settee, and he would strike any patients or attendants who happened to be near him and who had in no way irritated him.

He was put in a room at one time. I remember the first time we had to restrain him. He began then to butt his head against the wall, and he threatened to kill himself. He refused food for a few days. The case was a very distressing one. I remember on one occasion in the early morning the nurse discovered him in the bathroom. He had slipped and fallen on the floor and cut his chin. The night doctor had to take seven or eight stitches in his chin. A short while after that he was confined to his bed, and then he began tearing at his rectum. We found that there were scratches around the outer margin of the anus, and he was suffering from some hemorrhage. He tried to get his whole fist up into the rectum. We did not know what his idea was, whether it was suicidal or not; but at that time he was greatly demented.

Then on several occasions he banged himself in the head with his fist, and he was generally disturbed and noisy, and was very trying at that time. A short while after that it was reported to me one morning that the patient had fallen from bed and evidently had knocked his head against the table—a little stand that was used for serving the meals on—and had received a black eye. That was about a month before he died—fully a month before he died. He gradually grew weaker. The heart action grew weak weeks before his death. His face was swollen from the impaired heart action. Before his death the bruise which he had received that night had cleared up entirely, and I was totally unaware of any trouble until I read in the newspaper the testimony of Mr. Belt, one of our discharged attendants, who claimed that Mr. Teates, the charge attendant on the ward, or the charge nurse on the ward, had blacked his eye twenty-four hours before his death.

That did not occur, because his eye had not been black before his death, and the only bruise that he had received at that time was received nearly a month before the patient died and had cleared up entirely at the time of his death. That is all I know about the Percy Echols case.

The CHAIRMAN. Do you think he had as good treatment as he could have received?

Doctor GLASSCOCK. He got the best treatment anyone could have received.

The CHAIRMAN. You do not think he was cruelly treated?

Doctor GLASSCOCK. No, sir; I saw his sister on several occasions, and she expressed her appreciation to me on several occasions. She said she did not think her brother could be better cared for. It was the same with the patient's father and also with his mother.

After his death we received a letter from the family expressing their appreciation of the care and treatment he had received in the hospital and their gratefulness. A short while after we received a letter from them. They were very much distressed. They had read

in a Pennsylvania newspaper of this investigation, and they saw a statement that their brother was killed by an attendant by the name of Teates, as the result of a blow. Of course they were very much distressed about it. That was the status of the case.

The CHAIRMAN. There was not any truth in it?

Doctor GLASSCOCK. I do not think there was any truth in it. Mr. Teates I have known for three years, and I have always had a high regard for him. I always thought him patient, gentle, and fully competent to fulfill his duties, and such a thing as his treating Mr. Echols as it is claimed he did seems to me inconceivable. I do not see how anyone could treat that patient as he was supposed to have been treated, as helpless as he was at the time and for weeks before his death. He was not capable of walking.

Mr. SMYSER. Do you think his condition was such as to excite sympathy and even tenderness in the most brutal?

Doctor GLASSCOCK. Most assuredly.

The CHAIRMAN. Have you given testimony frequently in cases where a committee is appointed?

Doctor GLASSCOCK. Yes; I might say frequently. I do not remember exactly the number of times, but I have been over at court, and I can say frequently.

The CHAIRMAN. How long vacations do you take, Doctor?

Doctor GLASSCOCK. I have had one vacation since I have been there. I had a vacation last summer.

Mr. WALLACE. Did you give Echols an injection before he died?

Doctor GLASSCOCK. No; I did not. I did not see Echols before he died.

Mr. WALLACE. Do you know of anyone giving him an injection and removing from him a quart or two of feces?

Doctor GLASSCOCK. No, sir.

Mr. WALLACE. Do you know Maenche?

Doctor GLASSCOCK. Yes; I know Mr. Maenche.

Mr. WALLACE. Did you see him about the 5th day of December on a street car?

Doctor GLASSCOCK. I do not remember whether it was the 5th, or when it was. I remember Maenche coming home on the car one night, but whether it was last fall or last winter I do not remember. At that time Maenche had been probably imbibing a little too freely, but I do not think he was in any way drunk. He was off duty at the time, and was fully capable of taking care of himself.

Mr. WALLACE. Is that the time you told Doctor Fitch about?

Doctor GLASSCOCK. No, sir; I did not. I knew nothing with regard to Doctor Fitch.

Mr. WALLACE. You spoke of being a junior assistant out there?

Doctor GLASSCOCK. A junior assistant.

Mr. WALLACE. To Doctor Stack?

Doctor GLASSCOCK. Yes.

Mr. WALLACE. Does that imply that you have a senior assistant, too?

Doctor GLASSCOCK. Oh, no; Doctor Stack is the senior in the department. He is the first assistant physician. I am his assistant, and am the junior assistant in the department.

Mr. WALLACE. That makes you the junior?

Doctor GLASSCOCK. Yes.

The CHAIRMAN. Do you know a man by the name of Connell, who testified here the other day?

Doctor GLASSCOCK. Jeremiah Connell?

The CHAIRMAN. Yes.

Doctor GLASSCOCK. Yes; I know Jeremiah Connell.

The CHAIRMAN. What is the matter with him?

Doctor GLASSCOCK. Jeremiah, or Jerry, as we call him, is suffering, I think, most undoubtedly, from dementia, as the result of chronic alcoholism. When he was admitted to the institution he was suffering from a form of delirium which accompanies multiple neuritis. He had multiple neuritis and the delirium accompanying it. We sometimes call it Morsakow's psychosis.

The CHAIRMAN. I hope the stenographer can understand that.

Doctor GLASSCOCK. I think he is familiar with it.

The CHAIRMAN. What is his delusion. Has he illusions or delusions; whichever you call them?

Doctor GLASSCOCK. I think he has undoubtedly delusions.

The CHAIRMAN. Are there any specific ones that he has?

Doctor GLASSCOCK. Yes.

The CHAIRMAN. What is it?

Doctor GLASSCOCK. I did not know the nature of that until recently. I had heard it spoken of, but I did not know the exact nature of it until recently, when I asked Doctor Stack about it. It seems that before I came there—I believe I was in the institution, but in another department—a man committed suicide on Beech Ward. His name, I believe, was Soule. This man, Jeremiah Connell, was at that time in that ward. He had only been in the institution a short while, having been admitted a few weeks before that, and he was suffering from delirium. At that time he believed that he was receiving visits from his wife, and his wife had not been there. He believed that he had been going to town, when he had not been to town.

Just a few weeks prior a patient committed suicide, and I believe that shortly after that Connell stated that this man was his brother-in-law; that he was his wife's brother, and that the family did not recognize this man because he had married a negress, and that Soule had the same name as his wife, but was at the hospital under an alias. He also stated that Undertaker Gawler removed the patient from the institution that night; that he smuggled him out, and had him buried in a local cemetery. Such was not the case, I understand. Doctor Stack is fully familiar with all the particulars of the case. He knew the patient's father and mother. The father was a patient of Doctor Stack's. Doctor Stack saw the father and mother after the suicide occurred and talked with them freely in regard to the matter. Doctor Hummer says that at that time Doctor Stack went and notified the relatives of the patient's death, and that they were in no way. I understand, connected with the family of Jeremiah Connell's wife.

The CHAIRMAN. Do you think it safe to let Jeremiah Connell come out of the hospital now?

Doctor GLASSCOCK. I think not. I do not see any reason why he could not get along, but I doubt if he would be able to earn a living very long, because the man has deteriorated, I think—demented. I do not think he would do any harm to the community or to himself if he kept away from alcohol, which I doubt very much.



Mr. SMYSER. As between keeping him there and turning him loose where he could indulge in what you suggest, which is the better for him?

Doctor GLASSCOCK. The hospital.

The CHAIRMAN. He has been on parole for a number of years?

Doctor GLASSCOCK. He has been on parole for quite a while; ever since I have known him.

The CHAIRMAN. When he comes to town does he ever get drunk?

Doctor GLASSCOCK. I have never known of him getting drunk. He only comes to town for a day, or something like that. He has not been coming to town regularly until recently. We have been afraid to trust him for a long time, but he has been coming to town recently, as I suppose you gentlemen know.

The CHAIRMAN. Is he desirous of getting out?

Doctor GLASSCOCK. He is most desirous of getting out.

The CHAIRMAN. Would you, as a physician, advise that?

Doctor GLASSCOCK. I do not think he is a fit patient to go out and live in the community for any length of time. I do not see any reason why he could not go out and spend a month or so on a visit, but I am afraid he would go back to his old habit, and if he did the results would be far more serious than in the past. I have had numerous talks with his wife.

She does not wish him to come out. She does not think he is capable of coming outside, and does not think he is capable of taking care of himself. She has had talks with his old employers, whom, I understand from Connell, are most anxious to take him back, and she says that that is not the case; that they would not have him back. He tells her that they are holding open his position for him as soon as he is discharged from the hospital. She is very much afraid he will get out, because she does not think he is capable of taking care of himself, and she does not think it would be wise.

The CHAIRMAN. You are quite certain that this delusion he had relative to his brother-in-law being the man who killed himself is a delusion, are you?

Doctor GLASSCOCK. I do believe it to be a delusion. I do not know positively; I only know what Doctor Stack, who knew the full particulars of the case, has said. He knows the particulars. He is absolutely convinced that it is a delusion. He knew the family, and he says the father of the patient who committed suicide was in no way connected with Jeremiah Connell's wife's family. He knew the people very well indeed. The patient was buried in the hospital cemetery, and was not taken out by Undertaker Gawler. Connell says he was smuggled out in the middle of the night at the request of his father-in-law.

The CHAIRMAN. Was there any evidence of his being smuggled out?

Doctor GLASSCOCK. No.

The CHAIRMAN. The same proceeding was carried out as in the case of anybody else who dies at the hospital?

Doctor GLASSCOCK. Most assuredly.

The CHAIRMAN. You say he was buried in the hospital cemetery?

Doctor GLASSCOCK. I understand from Doctor Stack that he was; that his people were quite poor, and that he was buried in the hospital cemetery.

Mr. SMYSER. When you testify in court you do not forget to draw your fees, do you?

Doctor GLASSCOCK. I have drawn several fees from the courts. I perhaps may forget, because I have never sent a bill for fees. They have been sent to me when Mr. Fenning thought there was a sufficient amount on hand in the case to settle my fee.

Mr. SMYSER. Is there a combination between you doctors there and Mr. Fenning by which you get fees?

Doctor GLASSCOCK. No, sir; there is none between Mr. Fenning and myself at all.

Mr. SMYSER. Or any of the others that you know of?

Doctor GLASSCOCK. I do not believe so.

Mr. SMYSER. But when you are called on you go and testify?

Doctor GLASSCOCK. When I am called on I go and testify. I have testified quite a number of times when I have received no fee whatever.

Mr. SMYSER. But if it is a case in which—

Doctor GLASSCOCK. If it is a case in which there is a sum of money sufficient, Mr. Fenning has sent me a check. I do not think I have received over three or four. I do not remember exactly, but Mr. Fenning knows.

Mr. SMYSER. Out in our country they have coined an expression "tainted money" by reason of Mr. Rockefeller, who is a resident out there.

The CHAIRMAN. What do you expect from Ohio?

Mr. SMYSER. Well, it mostly comes from New York. Doctor, do you feel that in getting fees in cases there is anything wrong about it?

Doctor GLASSCOCK. I do not, sir. It is a lawful proceeding; I fully believe it to be.

The CHAIRMAN. Mr. Evans, do you wish to give any testimony in regard to the Connell matter?

Mr. EVANS. If you want to ask me any questions, I am willing to take the stand.

Mr. FLEMING. (the clerk of the committee). You said this man was Connell's brother-in-law?

Mr. EVANS. That is what Connell told me.

Mr. FLEMING. I thought you said you had the facts?

The CHAIRMAN. I understood from Mr. Fleming, the clerk of the committee, that you had proof in regard to this matter, and that is the reason I asked Doctor Glasscock the question about it, thinking that in the regular order of procedure we might ask you any questions about that.

Mr. EVANS. I do not know anything about it except what Mr. Connell told me. He said he had asked them to telephone to Gawler, the undertaker, who would know whether it was Harry Soule.

The CHAIRMAN. Was Mr. Gawler one of the undertakers that we had before us to-day?

Doctor GLASSCOCK. Yes; he was there.

Mr. EVANS (continuing). And that they declined to do it. I never inquired of Mr. Gawler myself, but I asked Mr. Connell this: "Are you willing to base your hopes of freedom from that institution upon the truthfulness of that statement?" and he told me it was absolutely so.

Mr. SMYSER. Mr. Evans, will you take the stand? I would like to ask you a question.

## ADDITIONAL TESTIMONY OF RICHARD P. EVANS.

RICHARD P. EVANS, having been heretofore sworn, resumed the stand and testified as follows:

Mr. SMYSER. Mr. Evans, I want to ask you a question or two with reference to your testimony the other day. You were attorney for Mrs. Lendner?

Mr. EVANS. Mrs. Lendner, formerly Briggs.

Mr. SMYSER. You were attorney for her?

Mr. EVANS. I was; yes.

Mr. SMYSER. Is that the case in which Mr. Fenning came to you?

Mr. EVANS. Mr. Fenning came to me and suggested in that case—

Mr. SMYSER. I say, is that the case?

Mr. EVANS. Yes.

Mr. SMYSER. Did he ever come to you in reference to any other cases?

Mr. EVANS. He came to me a second time in respect to that case and suggested then that I might have other similar cases; and if so, that he could act as committee and I could act as attorney in those cases.

Mr. SMYSER. This lady has never filed an account, has she?

Mr. EVANS. No; this lady was the mother of that insane child, who, I believe, was a paralytic. She spent the money that she received without keeping any vouchers for it, and she spent a good deal more than she got in, I am very certain. She could never fix up an account. I fixed up a sort of an account, but she never executed it, and some years since I think she moved out to California. I have not had any correspondence with her lately. She had formerly drawn that pension herself up to the date of her remarriage?

Mr. SMYSER. When did you last hear from her?

Mr. EVANS. I have not heard from her for—I couldn't say; a year or so, I guess.

Mr. SMYSER. With reference to that case, when Mr. Fenning came to you the second time did he say to you that he had discovered she was under citation from the court?

Mr. EVANS. I think he did, and that there was a fund there. You see the pension had been discontinued by the Pension Office.

Mr. SMYSER. And did he say to you that that being true he cared to have nothing further to do with the case?

Mr. EVANS. No, he did not.

Mr. SMYSER. Nothing of the kind?

Mr. EVANS. No. He said there was a fund there, the pension having been stopped by action of the Pension Office because of the fact that she had not filed this account; that there was a fund there that could be gotten, and that if he was appointed committee in that case he could get that fund.

Mr. SMYSER. What I want to particularly know is, did Mr. Fenning call on you with reference to any other cases? Did he ever name any other cases to you?

Mr. EVANS. He never specified any other case, except this case, which he called specifically about. Then on his second call with reference to this case he stated that I might have other similar cases, in which he would like to act as committee and I could act as attorney,

and I could get the attorney's fee and he would get the committee's commission, and I told him I did not care to enter into that sort of a deal.

Mr. SMYSER. I would like to ask Mr. Sanger a couple of questions.

#### ADDITIONAL TESTIMONY OF MONIE SANGER.

MONIE SANGER, having been heretofore sworn, resumed the stand, and testified as follows:

Mr. SMYSER. Mr. Sanger, I have been looking over a detailed statement that is made up for Doctor White, and which I think would aid the committee very materially in showing how you are trying to systematize that business. This is for the month of April?

Mr. SANGER. Yes.

The CHAIRMAN. I would like to ask Mr. Sanger where he got the facts embodied there.

Mr. SANGER. I got them from the financial clerk, from the people who made the goods, and from the records of goods received and disbursed. They are actual records from the various people in charge at the time of each class of work.

The CHAIRMAN. You know that this statement which we are going to put in the record is an accurate excerpt from the books and is the result of testimony that you have obtained from people in direct charge?

Mr. SANGER. Yes, sir. I would like to say that in making a statement from month to month of such stuff as dry goods, etc., for instance, there will be a certain number of trousers that will probably come out not completed; but, if you take it by the year, we account for every item.

Mr. SMYSER. And this is a sample of what comes in month after month?

Mr. SANGER. That is a sample of what takes up my time from 9 until 4.30.

Mr. WALLACE. Is that the one you spoke of as being already in the record?

Mr. SANGER. No, sir; this is another one.

Mr. WALLACE. When did you commence making those statements?

Mr. SANGER. In December or January, I think—as soon as I got satisfactory conditions in each department. As soon as I got them in one department I would take another.

Mr. WALLACE. You make it monthly?

Mr. SANGER. I make it monthly, but my intention is to get things in such condition as that we can make it yearly and have a class of books fixed up so that I can get it daily if needed, so that if the expenses are too great and there is a deficiency, it can be cut down where it needs to be cut down.

Mr. SMYSER. In this way you are able to keep track of everything?

Mr. SANGER. Of everything in the institution.

(The statement referred to is as follows:)

GOVERNMENT HOSPITAL FOR THE INSANE,  
Washington, D. C., May 17, 1906.

Dr. WILLIAM A. WHITE,  
*Superintendent Government Hospital for the Insane.*

SIR: We herewith submit a detailed statement—cost and results—of work in sewing rooms, paint shop, bakery, tin shop, mattress shop, and dairy for the month of April, 1906.

The costs vary from month to month, depending on production, etc.

Very respectfully,

MORIE SANGER, *Storekeeper.*

*Detailed statement of sewing and mending rooms, costs and results.*

Materials .....	\$1, 150. 19
Pay roll and maintenance .....	499. 50
Interest on investment, at 5 per cent (plant value, \$2,000) .....	8. 33
Deterioration and repairs .....	16. 67
<b>Total .....</b>	<b>1, 674. 69</b>
Itemized list attached .....	1, 377. 00
<b>Balance, mending, etc .....</b>	<b>297. 69</b>

*Quantities and values of articles made in sewing and mending rooms and tailor shop during April, 1906.*

14 aprons, cotton, at \$0.15 .....	\$2. 10
1 apron, dining room .....	. 20
30 aprons, gingham, at \$0.18 .....	5. 40
36 bibs, at \$0.18 .....	6. 48
178 blouses, flannel, at \$2.25 .....	400. 50
18 bags, broom, at \$0.15 .....	2. 70
3 bases, ball, at \$0.30 .....	. 90
92 cases, pillow, at \$0.15 .....	13. 80
12 chemises, at \$0.28 .....	3. 36
9 caps, rubber, nurse's, at \$0.18 .....	1. 62
7 cloths, table, long, at \$4.07 .....	28. 49
2 cloths, table, medium, at \$3.57 .....	7. 14
8 cloths, table, short, at \$1.87 .....	14. 96
4 Curtains, Swiss, at \$0.92 .....	3. 68
18 curtains, Holland, at \$0.80 .....	14. 40
4 covers, screen, at \$0.17 .....	. 68
1 cloth, Turkey red .....	1. 15
6 corner pieces, at \$0.55 .....	3. 30
4 corner pieces, at \$1 .....	4. 00
4 covers, bureau, Swiss, at \$0.36 .....	1. 44
86 coats, overall, at \$0.91 .....	78. 26
88 coats, citizen's, at \$1.61 .....	141. 68
1 coat, dentist's .....	1. 30
2 coats, brown linen, at \$1.50 .....	3. 00
9 drawers, cotton, at \$0.28 .....	2. 52
267 drawers, canton flannel, at \$0.42 .....	112. 14
47 dresses, gingham, at \$0.80 .....	37. 60
3 dresses, percale, at \$1.85 .....	5. 55
14 dresses, night, long, at \$0.56 .....	7. 84
135 dresses, night, short, at \$0.29 .....	39. 15
53 pants, overall, at \$0.71 .....	37. 63
3 pants, citizen's, at \$1.45 .....	4. 35
66 petticoats, at \$0.41 .....	27. 06
187 shirts, check, at \$0.45 .....	84. 15
11 shirts, night, at \$0.52 .....	5. 72
188 shirts, canton flannel, under, at \$0.44 .....	82. 72
247 sheets, at \$0.44 .....	108. 68
2 skirts, gingham, dress, at \$0.41 .....	. 82
7 strainers, at \$0.56 .....	3. 92
6 straps, razor, at \$0.10 .....	. 60

20 ticks, mattress, at \$0.81-----	\$16. 20
60 towels, bath, at \$0.14-----	8. 40
45 towels, roller, at \$0.32-----	14. 40
73 towels, tea, at \$0.11-----	8. 03
46 vests, at \$0.63-----	28. 98
	<hr/>
	1, 377. 00

*Articles made and repaired in work and mending rooms.*

## MADE.

Aprons, kitchen-----	14	Petticoats-----	2
Dress suits-----	8	Shirt waists-----	5
Towels, kitchen-----	11		

## REPAIRED.

Aprons-----	21	Pants-----	130
Blankets-----	18	Rugs-----	2
Bags, clothes-----	2	Spreads-----	77
Curtains-----	30	Sheets-----	425
Cloths, table-----	72	Shirts:-----	
Coats-----	9	Under-----	595
Covers:-----		Bosom-----	215
Stand-----	26	Night-----	607
Car-----	26	Check-----	698
Cases, pillow-----	93	Socks (pairs)-----	33
Drawers-----	870	Straps, buckle-----	355
Dress suits-----	2	Towels, face-----	34
Napkins-----	75	Ticks, mattress-----	81
Names sewed on-----	1, 309	Vests-----	9

*Detailed list of work, paint shop.*

Retreat-----	\$451. 57
Allison building-----	10. 51
C building-----	49. 48
Radiators, female department-----	24. 55
Floor, A building-----	11. 95
Ventilators, kitchen-----	23. 80
Floor, kitchen-----	5. 95
Cupboards, R and P buildings-----	5. 95
Greenhouse-----	5. 43
New chairs-----	10. 60
Settees-----	5. 15
Jobbing-----	28. 39
Glazing-----	44. 84
Total-----	<hr/>
	679. 17
Material transferred to other departments:	
Glass, Godding Croft-----	\$0. 64
Turpentine for floor wax-----	55. 34
Oil for floor wax-----	3. 84
Coach painting department-----	2. 38
Construction department-----	3. 16
	<hr/>
	65. 36
Total-----	<hr/>
	744. 53

*Receipts and expenditures, paint shop.*

1,205 pounds white lead, at \$0.06 $\frac{1}{10}$ -----	\$73. 50
122 gallons turpentine, at \$0.58 $\frac{1}{10}$ -----	71. 07
15 $\frac{1}{2}$ gallons oil, at \$0.48-----	7. 44
58 gallons varnish, at \$1.70-----	98. 60
84 lights glass-----	22. 10

## GOVERNMENT HOSPITAL FOR THE INSANE.

1347

4 pounds filler, at \$0.15	\$0. 60
1½ gallons gasoline, at \$0. 16	. 24
1 pound chrome yellow, at \$0.11	. 11
1 sash tool	. 16
3 pounds aluminum bronze, at \$1.50	4. 50
2 pounds size, at \$0.60	1. 20
Total material	279. 53
Pay roll and maintenance	440. 00
Depreciation, wear, and tear	25. 00
Total	744. 53

*Made in bakery during April, 1906.*

39,767 loaves white bread, at \$0.0276	\$1,097. 57
1,516 loaves graham bread, at \$0.021	31. 83
1,356 pounds ginger bread, at \$0.03	40. 68
176,600 morning rolls, at \$0.00365	644. 59
5,800 finger rolls, at \$0.00365	21. 17
17,642 French rolls, at \$0.00365	64. 40
11,560 buns, at \$0.00365	42. 19
5,760 currant buns, at \$0.0043	24. 77
2,000 soda biscuits, at \$0.0038	7. 60
20,600 sugar cakes, at \$0.0034	70. 04
488 pounds coffee cakes, at \$0.00319	15. 57
1,242 pounds currant cakes, at \$0.00521	64. 71
930 pounds cottage pudding, at \$0.06	55. 80
3,076 pie crusts, at \$0.028	86. 13
Total	2,267. 05

*Material used in bake shop during April, 1906.*

284 barrels wheat flour, at \$5.10	\$1,448. 40
1 barrel Graham flour	3. 96
2,745 pounds lard, at \$0.06½	185. 28
2,366 pounds granulated sugar, at \$0.05½	132. 50
10 pounds powdered sugar, at \$0.06½	. 62
2 pounds ginger, at \$0.16	. 32
6½ pounds mace, at \$0.50	3. 25
1 pound cloves	. 30
5 pounds cinnamon, at \$0.20	1. 00
10 pounds soda bicarbonate, at \$0.01½	. 17
3 pounds cream of tartar, at \$0.24½	. 73
28 pounds yeast powder, at \$0.16½	4. 65
136 pounds butter, at \$0.12½	17. 00
136 dozen eggs, at \$0.15	20. 40
34 gallons molasses, at \$0.24½	8. 33
725 pounds salt, at \$0.00½	2. 72
16 gallons milk, at \$0.18	2. 88
1 pound chocolate, at \$0.24½	. 25
	1,832. 76
Pay roll and maintenance	375. 00
Fuel, 2½ tons coal	17. 00
Plant investment, \$3,600, at 5 per cent	15. 00
Deterioration, repairs, and replacing, 10 per cent	30. 00
Total cost	2,269. 76
Articles made as per list attached	2,267. 05
Bread pudding, etc.	2. 71

*Cost of material in tin shop, April, 1906.*

13½ sheets XX tin	\$3. 33
20½ sheets XXXX tin	7. 06
4 sheets tin roofing	. 56
40½ pounds solder	6. 52
54 pecks charcoal	1. 08
154 pounds galvanized iron	5. 85
23 pounds wire	1. 73
6 ears	. 04
2 pints gasoline	. 01
552 pounds range castings	27. 60
104 rivets	. 14
Range brick	4. 00
29 stove bolts	. 15
9 spout hooks	. 27
72 feet spouting	3. 33
60 feet guttering	4. 20
5 elbows	. 50
Muriatic acid	. 03
27½ tin bundles	4. 34
14 pan handles	. 81
14 clamps	. 17
2½ pounds nails	. 07
½ pound solder salts	. 33
21 cutter hangers	1. 80
	<hr/>
	\$73. 92
Pay roll and maintenance	140. 00
Interest on investment, \$600 at 5 per cent	2. 50
Repairs and depreciation on plant, \$600 at 10 per cent	5. 00
	<hr/>
	221. 42

## Ranges:

A officers kitchen	1. 65
General kitchen	15. 18
Allison kitchen	2. 92
Detached kitchen (twice)	10. 10
A general kitchen	5. 46
	<hr/>
	35. 31

## Roofs and gutters:

Dawes building	11. 23
Dawes chapel	3. 00
Center building	3. 00
Main building	2. 30
Old laundry	2. 73
Cypress	11. 58
Retreat 3	7. 98
Retreat 2	13. 01
Dodge house	2. 16
Spruce	16. 80
General kitchen, renewing slate, and putting on new roof vent.	17. 25
Bakery, repairing and putting up gutters	15. 46
	<hr/>
	106. 50

## Transfers:

Detached buildings	
Galvanized iron, 3 pounds	. 11
Report tin shop	3. 26
Moving castings	1. 80
Dry room, laundry	13. 32
	<hr/>
	18. 49

## Repairs generally:

26 pieces tinware, 5 kitchens	6. 47
26 pieces tinware, 5 kitchens	3. 54
2 pieces tinware, A, general kitchen	. 94
7 pieces tinware, A, general kitchen	1. 71
1 can, engineer's department	. 22
1 refrigerator, Q, 3, D. R.	1. 74



## Repairs generally—Continued.

3 pieces tinware, Gooding Croft	\$0.63
1 bath mixer, Q building	.56
1 refrigerator, Toner building	1.43
1 milk cooler, dairy	1.43
	<hr/> \$24.54

## New work:

6 round pans, storerooms	13.47
1 boiler, detached kitchen	2.00
1 oil can, laundry, engineer's department	1.34
1 can, E building	1.91
1 food box; 15 food boxes, small, J building	3.40
	<hr/> 22.12
1 ventilator shield, Dawes third	1.64
6 chair pans, female department	4.35
12 food boxes; 1 tin bucket, P building	8.47
	<hr/> 14.46

Total ..... 221.42

Total for material as per list attached ..... 221.42

*Report of mattress shop for April, 1906.*

## COST.

21 mattress ticks, at \$0.81	\$17.01
1 pillow tick	.20
100 pounds hair, at \$0.36	36.00
10 pounds twine, at \$0.34	3.40
1 mattress needle	.01
1½ dozen spools cotton, at \$0.44½	.52
Pay roll and maintenance	55.00
Interest on investment, \$150, at 5 per cent	.63
Depreciation and repairs, 10 per cent	1.25
	<hr/> 114.02

## RESULTS.

Mattresses on hand April 1	24
Mattresses made during April	115
	<hr/> 139
Total	139
Mattresses exchanged	115
	<hr/> 24
Balance on hand April 30	24
	<hr/> 6
Pillows on hand April 1	6
Pillows made during April	88
	<hr/> 94
Total	94
Pillows exchanged	79
	<hr/> 15
Balance on hand April 30	15
	<hr/> 6
Drawn cloth mats on hand April 1	6
Drawn cloth mats made during April	4
	<hr/> 10
Total	10
Drawn cloth mats issued during April	6
	<hr/> 4
Balance on hand April 30	4
	<hr/> 36
Braided cloth mats on hand April 1	36
Braided cloth mats issued during April	36
	<hr/> 72

Husk mats on hand April 1	49
Husk mats made during month	13
Total	62
Issued during month	12
Balance on hand April 30	50
Socks repaired	pairs 206
Clothing repaired	pieces 30
Hair picked	pounds 2,825

## INVENTORY.

Mattress ticks on hand April 30	17
Pillow ticks on hand April 30	34
New hair	pounds 1,000
Old hair	do 200
Twine	do 5½
Mattress needles	5
Cotton	spools 30

*Cost of dairy.*

Purchases:	
20 tons clover hay, at \$15.75	\$315.00
9½ tons bran, at \$19.90	189.05
3½ tons flaxseed meal, at \$31	110.50
180 bushels corn meal, at 55 cents	99.00
40 tons ensilage, at \$5	200.00
Total	\$913.55
Pay roll and maintenance	473.00
Value of stock, etc., \$6,000.	
Interest on investment, at 5 per cent	25.00
Reserve for sinking fund, 10 per cent	50.00
Total	1,461.55
Deduct one-sixth value of feed for fertilizer	152.26
Net	1,309.29

8,533 gallons milk, at \$0.1534 per gallon.

Pasteurizing—	
Steam for month	3.46
Water	.46
Refrigerating	4.46
Power	13.59
Pay roll and maintenance	35.00
Interest on original investment, \$1,200, at 5 per cent	5.00
Reserve for sinking fund, 10 per cent	10.00
Total	71.97

9,133 gallons milk pasteurized during month, per gallon	.0078
8,533 gallons milk produced during month, per gallon	.1534
	.1612

The committee thereupon (at 4.30 p. 'm.) adjourned until Monday, June 18, 1906, at 2 p. m.

## HOUSE OF REPRESENTATIVES,

*June 19, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace.

Also Doctor White, Mr. Evans, Mr. Clark, and others.

## TESTIMONY OF DR. GEORGE M. KOBER.

Dr. GEORGE M. KOBER, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor, you are a physician, I believe?

Doctor KOBER. Yes, sir.

The CHAIRMAN. How long have you been practicing medicine?

Doctor KOBER. Since March, 1873.

The CHAIRMAN. What is your present official position?

Doctor KOBER. I am professor of hygiene at the School of Medicine of the Georgetown University and president of the Association of American Medical Colleges.

The CHAIRMAN. How long have you been professor in Georgetown?

Doctor KOBER. Since about 1889.

The CHAIRMAN. Have you had occasion to visit St. Elizabeth's often, Doctor?

Doctor KOBER. Yes. I have had, probably every year, more than one occasion to visit there, and, indeed, a few years ago, when I had a patient there, my visits were quite frequent.

The CHAIRMAN. Was that while Doctor White was superintendent that you visited there?

Doctor KOBER. I visited the institution probably three times since Doctor White has been in charge. Recently, perhaps about three months ago, my last visit was in connection with the president of the Georgetown University. We had just made an inspection of all the hospitals in the city—that is, a visit was made to all the hospitals in the city—for the purpose of seeing what clinical advantages they afforded, and we made a visit about that time also to the Government Hospital for the Insane.

The CHAIRMAN. Did you spend the day there?

Doctor KOBER. We spent about three hours.

The CHAIRMAN. What parts of the institution did you visit?

Doctor KOBER. We saw quite a number of the wards. I think we probably saw all of the important wards—the Administration building, the dining rooms, the laboratories, and, indeed, we had quite a general survey of the situation.

The CHAIRMAN. Doctor, what do you think of the institution itself?

Doctor KOBER. My impressions have always been very favorable, and they have not been changed by the recent visit. Comparing, as we did, from other institutions, we were in a position, at least in my mind, to institute intelligent comparisons, and my impression as to cleanliness, general attention to details, and general efficiency in the care of the sick was exceedingly favorable.

The CHAIRMAN. Did you go into the kitchen department?

Doctor KOBER. No; the dinner was served about that time, and I saw the food that was served in a number of dining rooms, and also in the wards.

The CHAIRMAN. Were you in the large dining room where something like five or six hundred patients eat?

Doctor KOBER. Perhaps not on that occasion, but I have been there. I am quite sure I visited it, but I would not be positive that I saw the dining room on that occasion. Perhaps I did, but I saw the food that was served in a number of the smaller dining rooms and also in some of the wards. As I say, I would not like to be positive that I

saw the dining room on that particular occasion, but my impression is that I did.

The CHAIRMAN. Doctor, who were with you at the time you made this visit?

Doctor KOBER. This last visit—the president of Georgetown University, Father Buell.

The CHAIRMAN. There has been a great deal of talk in this investigation in regard to the use oleomargarine. What is your opinion of oleomargarine for the use in a large institution of that kind, as compared with butter?

Doctor KOBER. Exceedingly favorable to the use of oleomargarine for economic reasons, and particularly on the ground that there is absolutely no objection to the use of oleomargarine for health reasons. I might say here that oleomargarine is the outcome of a series of experiments that were conducted at the instigation of the French Government, in 1868, for the purpose of securing a good and wholesome substitute for butter at less price, a substitute which might be used in the army and navy and among the wage-earners of France. My impression is that the French Government subsidized Mège-Mouriez, the French chemist, for the purpose of conducting a series of investigations or experiments. The result is what we know to-day as oleomargarine.

It was practically a mixture of different oils, and the basic principles are the so-called oleo, which is a refined and wholesome fat, derived from the caul of the beef, a neutral lard, which is derived from the leaf lard of the hog. Those form the basis for the oleomargarine. These two fats are melted at a certain temperature and churned in milk. In the cheaper grades a certain percentage of cotton-seed oil is added. Cotton-seed oil is also known for its nutritive value and is indeed a very fair substitute for olive oil. The mixture is churned, as I say, in milk, rich milk usually, so as to secure the butter flavor. Then a certain percentage of salt is added and the substitute is an exceedingly creditable one. The percentage of fat in oleomargarine is really somewhat lower than in butter itself. Being derived, as it is, from pure fats, no objection can possibly be urged on the score of health. In fact, I do not know of a single instance where a disease of any kind has been attributed to the use of oleomargarine, or butterine, as it is called.

As a teacher of hygiene I have urged for years upon our students to bring the merits of the substitute to the attention of the public, particularly in the interest of wage-earners, to correct as far as possible the prejudices which exist against this food stuff, my view being that if you can supply a pound of butterine for 15 cents which, so far as nutritive value goes and digestibility is concerned, is the equivalent of a 25 or 30 cent pound of butter, it is clearly to the interest of every man to bring the merits of the substitute to the attention of the public. Unfortunately a great deal of prejudice has been created against oleomargarine, and it is up to those who are in a position to know definitely to correct these prejudices.

I would like to state that perhaps the most extensive feeding experiments in order to test the relative digestibility between butter and oleomargarine were made in Europe as early as 1883 by Mayer, by Kienzel in 1898, and by Luhring in 1899, and also by Professor Jolles, in a report to the Imperial Academy of Sciences, in Vienna,

in March, 1894. These men, as well as Wibbens, from the Physiological Institute of Berlin, all conclude, after a painstaking series of physiological feeding experiments, that there is practically no difference between the digestibility of butter and butterine or oleomargarine. An average result of all experiments were that 96.96 per cent of the butter was digested and 96.27 per cent of the oleomargarine was digested, being practically less than seven-tenths of 1 per cent difference.

I might read here, as it expresses my own views on the subject very well, the statement of Wibbens, in the Archives for Physiology, published in February, 1904, on page 609. He says:

Everybody has cut his coat according to the cloth, and it therefore is a great blessing for all mankind that those who have to deny themselves the regular use of natural butter will find in artificial butter a wholesome and cheap substitute.

The CHAIRMAN. Doctor, what is that you are reading from?

Doctor KOBER. I am reading now from a paper which I prepared and read before the American Social Science Association April 24, 1902.

The CHAIRMAN. We could have that as an exhibit, could we not?

Doctor KOBER. Yes; you are welcome to it.

The CHAIRMAN. Let us have that. Did you give testimony before a Congressional committee in the Fifty-seventh Congress?

Doctor KOBER. A good part of the same evidence is before a Congressional committee. In this same paper I have quoted the gist of opinions expressed before the Senate committee on the investigation of oleomargarine. For instance, Professor Schweitzer, of the Missouri State University, in his testimony before the Senate Committee, states that careful physiological experiments revealed no difference whatever in palatability and digestibility between butter and the brand of butterine which he examined.

Professor Barker, of the University of Pennsylvania, considers butterine quite as valuable a nutritive agent as butter.

Professor Johnson, of Yale University, says that for all the ordinary and culinary purposes it is the full equivalent of butter made from cream, and regards the manufacture of oleomargarine as a legitimate and beneficent industry.

Professor Arnold, of the medical department of the University of New York, the College of Physicians and Surgeons, characterizes it as "a blessing for the public, and in every way a perfectly pure, wholesome, and palatable article of food."

Henry Morton Stevens, Institute of Technology, New Jersey; A. C. Caldwell, of the chemical laboratory, Cornell University; Henry A. Mott, of New York, and W. O. Atwater, of Wesleyan University, Connecticut, have all offered similar testimony.

The CHAIRMAN. Doctor, If you will let us have that paper we will file it as an exhibit. The stenographer will mark it.

The paper referred to was marked "Exhibit Kober No. 1." (See page 1748.)

Mr. SMYSER. Do you say now, Doctor, that it is scientifically determined that butterine or oleomargarine is nutritive and healthful and a good substitute for natural butter?

Doctor KOBER. Absolutely. The only difference is one of six-tenths of 1 per cent in digestibility; that is, if you have a good butter, the

butter will be absorbed at least to the extent of seven-tenths of 1 per cent more than oleomargarine.

Mr. SMYSER. I simply want, by my question, to reach conclusions.

Doctor KOBER. Yes, sir.

The CHAIRMAN. Doctor, the artificial butter keeps much longer also, does it not?

Doctor KOBER. Yes. It practically can not be prepared without having the benefit of what we call pasteurization. It has to be subjected to heat, and really the danger, I think, from the transmission of germs would be less in oleomargarine, than it would be in butter, because it all has been subjected to a heat sufficient to destroy any micro-organisms that may be present in the original constituents.

Mr. WALLACE. You say about three weeks ago you made your visit?

Doctor KOBER. It is longer than that. I should say it was about two months ago.

Mr. WALLACE. How long before that did you make a visit?

Doctor KOBER. I was there last year, probably at intervals of about twice a year, excepting five years ago, when my visits were quite frequent, nearly every Sunday, for perhaps two or three months.

Mr. SMYSER. But if you could get good butter you would not advise a fellow not to use it instead of oleomargarine, would you?

Doctor KOBER. Yes; I should, for economic reasons. I have very strong views on the subject of economy in food. I realize that a man can get for 25 cents a day just about the same food stuff that you would get for \$2.50 if you took a meal at Delmonico's. In other words, you would be just as well off to eat your 25-cent ration as to pay \$2.50 for a meal at Delmonico's or some other fashionable restaurant.

Mr. WALLACE. Doctor, what do you think of the economy of the food at St. Elizabeth's?

Doctor KOBER. My impression, from what I saw of the table, is that the food is ample in quantity, good in quality, and as well served as it could possibly be expected in institutions.

Mr. WALLACE. From what you saw?

Doctor KOBER. Yes, sir.

Mr. SMYSER. And from an economical and healthful standpoint, you say, it would be the part of wisdom in the institution to use oleomargarine instead of butter?

Doctor KOBER. I should say so. The same reasons that actuated the French Government in providing a cheap substitute for butter, I think, ought to actuate those who are interested in economic questions. I do not hesitate for a moment to tell my students that it is their duty to urge upon the average wage-earner in this country the desirability of eating oleomargarine at 15 cents a pound rather than to pay an extravagant price—30 or 35 cents—for butter, which is no better, as far as nutritive value is concerned.

Mr. SMYSER. But you understand that an institution out here like St. Elizabeth's, with the class of patients that it necessarily has, is subjected to much criticism by reason of the fact that oleomargarine is substituted in place of butter. Is such criticism merited or not?

Doctor KOBER. I should say it is most unjust, and such criticism would not be made if the public at large was better educated as to the real merits of this food stuff.

**ADDITIONAL TESTIMONY OF MISS HELEN R. TANQUARY.**

Miss HELEN TANQUARY, having been heretofore duly sworn, was examined, and testified as follows:

The CHAIRMAN. Miss Tanquary, when you were here before Mr. Hay questioned you in regard to the number of attendants and asked you to consider how many you thought would be necessary in addition.

Miss TANQUARY. I testified then we had 69 nurses.

The CHAIRMAN. Yes; I think so.

Miss TANQUARY. In charge of the wards, did I not, who did actual duty on the wards?

Mr. HAY. Yes; you were asked whether you thought they were sufficient, and you said you did not.

The CHAIRMAN. You testified there were 51 nurses under you on day duty and 18 on night duty, making 69 in all.

Miss TANQUARY. That did not include the two nurses who work in the douche room, in the hydro-therapeutic department.

The CHAIRMAN. You were asked, I think, whether you thought that was a sufficient number of nurses, and I think you testified you did not think it was. You were then asked as to how many more you thought you should have for the best service of the patients?

Miss TANQUARY. Yes.

The CHAIRMAN. And for the proper consideration of the nurses themselves?

Miss TANQUARY. I looked over the situation and I think that on the disturbed wards, owing to the class of patients we have there, in the Q building we should have one more on each ward.

The CHAIRMAN. How many would that make altogether?

Miss TANQUARY. That would make three nurses on each ward of the four wards. There are four wards. When these nurses are taking their vacation the other is left alone practically for fifteen days. Also in the evenings from 6 until 8 one nurse is there alone, and we have had trouble with patients that are very disagreeable—quite violent.

Mr. HAY. So you think you need twelve more?

Miss TANQUARY. Four more in that ward, in the C building. I would suggest another attendant in the receiving ward and the suicidal ward.

Mr. HAY. That would be six?

Miss TANQUARY. That would be five, and owing to the fact that that ward is very responsible. Also another night nurse in the C building—C 3. Those wards are far apart and there are practically disturbed patients on both wards. The nurse has occasionally quite a little to do, and often has to have assistance from the nurse downstairs. I should also think you could use three waitresses, one in the H building, one in the J building, and one in Oaks A building. With this additional help I do not see why everything would not be all right.

The CHAIRMAN. How many does that make altogether; six nurses and three waitresses?

Miss TANQUARY. Six nurses and three waitresses.

Mr. WALLACE. When you use the expression "quite a little," do you not mean a great deal? Is that the sense in which you use it?

Miss TANQUARY. I don't know. Probably it is just an expression.

Mr. WALLACE. Do you mean they have a little to do, or that they have a great deal to do?

Miss TANQUARY. They have quite a good deal to do.

Mr. SMYSER. Your testimony this morning is in answer to the request that was made of you when you were here before, that you, being in charge of this ward, would minutely investigate the situation and report as to what your conclusions were in reference to the additional force necessary. Is that right?

Miss TANQUARY. Yes, sir.

#### TESTIMONY OF C. E. LYMAN.

C. E. LYMAN, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Lyman, what is your business?

Mr. LYMAN. I am manager for Swift & Co.

The CHAIRMAN. Here, in the city of Washington?

Mr. LYMAN. Yes, sir.

The CHAIRMAN. What is the business of Swift & Co.?

Mr. LYMAN. Beef dealers, produce, etc.

The CHAIRMAN. Are they the Chicago Swift & Co.?

Mr. LYMAN. Yes, sir.

The CHAIRMAN. Do you contract to supply meats to St. Elizabeth's?

Mr. LYMAN. Some; yes, sir.

The CHAIRMAN. Have you a contract running?

Mr. LYMAN. Yes, sir.

The CHAIRMAN. How is that made?

Mr. LYMAN. Yearly.

The CHAIRMAN. After competitive bidding?

Mr. LYMAN. Yes, sir.

The CHAIRMAN. You put in your bid and the contract is awarded to you by the Interior Department?

Mr. LYMAN. Yes, sir.

The CHAIRMAN. What have you to say in regard to the character of the beef you are furnishing?

Mr. LYMAN. We are not furnishing beef. I will tell you what we are furnishing. We have only a portion of it. We have lamb, mutton, and shoulders. I think that is all—three articles.

The CHAIRMAN. How much lamb or mutton do you furnish them in the course of a year?

Mr. LYMAN. They use about 250 pounds of lamb a month, furnished once a week. At times they use 1,400 or 1,500 pounds of mutton a week, but they haven't used any since, possibly, last winter some time.

The CHAIRMAN. You mean they have not used either lamb or mutton?

Mr. LYMAN. They use lamb every week. About 250 pounds we furnish them every month.

The CHAIRMAN. You are apt to sell more mutton in the winter time than in the summer anyway, are you not?

Mr. LYMAN. Not necessarily; no, sir. I presume they substitute something else in the place of mutton.



The CHAIRMAN. What does your contract call for relative to the amount of lamb and mutton that you furnish?

Mr. LYMAN. I can't tell you exactly; but I think something like 40,000 of mutton, more or less, and 20,000 pounds of lamb, more or less, and then there is something like 100,000 pounds of sugar-cured shoulder.

The CHAIRMAN. Have you the contract?

Mr. LYMAN. We have—Swift & Co.

The CHAIRMAN. I mean with you?

Mr. LYMAN. No, sir.

Mr. SMYSER. Where is it?

Mr. LYMAN. Our contract? Why, it is in Chicago.

Mr. HAY. The Secretary of the Interior has it.

Mr. LYMAN. I presume I can get a copy of it if you want it.

Mr. SMYSER. I thought possibly you might have it.

Mr. LYMAN. No, sir; we contract through Chicago. We are their agents here to supply the goods.

The CHAIRMAN. Mr. Lyman, what is the character of the lamb and mutton as to quality that you furnish to the asylum?

Mr. LYMAN. Nothing but good. They won't take anything else.

The CHAIRMAN. Have you found that the inspection over there is rigid?

Mr. LYMAN. Why, yes. In the matter of shoulders, smoked shoulders, I have had three shipments sent back to me within the past year.

The CHAIRMAN. What for?

Mr. LYMAN. Along early in the spring or late in the winter I sent some California hams. They are practically the same thing. They trim like a shoulder. They were too coarse and heavy for them. The meat was good, but they wanted the smaller hams. Boston shoulders, we call them; and in the first part of this month, possibly the 8th, they returned some to me, and last week, out of seven or eight hundred pounds of shoulders, they sent one back. I asked the provision man what was the matter with it. He said he didn't find anything the matter with it, but it didn't suit them, and they sent it back. That is all that I have had rejected in the past year.

The CHAIRMAN. Do you furnish lamb and mutton to other institutions than St. Elizabeth's?

Mr. LYMAN. Yes, sir.

The CHAIRMAN. Which ones?

Mr. LYMAN. The Freedmen's Hospital.

The CHAIRMAN. Do you furnish any to the army posts, Fort Myer and other posts?

Mr. LYMAN. We contract by the month. Sometimes we take Washington Barracks. We get them. We contract with Fort Myer for some things.

The CHAIRMAN. How do you think the inspection at these other institutions compares with St. Elizabeth's?

Mr. LYMAN. I think they are all pretty strict. We don't send them anything but good goods. It don't pay to do it. It don't pay to have them returned to us.

The CHAIRMAN. Did you ever have any complaints made in regard to the weight of lamb and mutton sent to St. Elizabeth's?

Mr. LYMAN. No; we take their weights generally.

The CHAIRMAN. Do you not contract to sell lamb and mutton to weigh not less than so much?

Mr. LYMAN. Lambs average about the same weight. No; they don't contract for the weight of lambs.

The CHAIRMAN. How about mutton?

Mr. LYMAN. Mutton weighs about 40 pounds, possibly when trimmed.

The CHAIRMAN. Does not your contract call for the minimum weight? Does not the contract fix the minimum and maximum weights?

Mr. LYMAN. I think it does on mutton, but not on lambs.

The CHAIRMAN. Have you ever had any mutton returned to you because it was underweight?

Mr. LYMAN. No, sir.

Mr. SMYSER. Do you inspect this meat before it goes out there?

Mr. LYMAN. Oh, yes; we receive it every day, and it is always in good shape. Our stuff is killed in the West and shipped here in refrigerator cars, so it is always in first-class shape.

Mr. SMYSER. But do you inspect it to see if it is in first-class shape before you send it out to the hospital?

Mr. LYMAN. Oh, yes.

Mr. SMYSER. Do you do that personally?

Mr. LYMAN. Sure; yes, sir.

Mr. SMYSER. You do not send them any bad stuff?

Mr. LYMAN. No, sir.

Mr. WALLACE. Mr. Lyman, do you receive any part of a sheep back from these other institutions?

Mr. LYMAN. No, sir.

Mr. WALLACE. You received back from St. Elizabeth's only a shoulder?

Mr. LYMAN. I had three shipments sent back to us in the past year. One was in the early spring or late in the winter—on account of being too coarse, they claimed. The meat was good, but it didn't suit them. Then I had a shipment about the 8th of this month sent back; and on the 14th, I think, we had one shoulder out of possibly seven or eight hundred pounds sent back. I asked our provision man if he found anything the matter with it, and he said he couldn't see anything the matter with it.

Mr. WALLACE. Was there anything the matter with that shoulder?

Mr. LYMAN. He said not. I didn't examine that.

Mr. WALLACE. Maybe it was a case of too much shoulder.

Mr. LYMAN. No; it didn't suit them; that was all. Possibly it might have been sour on the bone. You can't tell. They inspect every piece very close over there.

The CHAIRMAN. Do they cut the strings also, so as to throw them out and get the full weight?

Mr. LYMAN. No; they do that out in Chicago.

The CHAIRMAN. One of the witnesses here testified they saw that done in St. Elizabeth's.

Mr. LYMAN. No; when we ship our goods out we generally send a weigh ticket with them. The weight might vary a pound or two, but not very much. We don't charge the goods until we get our weigh slips back from them.

Mr. SMYSER. You take their weights, do you?

Mr. LYMAN. Yes, sir. It wouldn't vary more than a pound or two.

Mr. SMYSER. You take their weight, in fact?

Mr. LYMAN. Yes.

Mr. SMYSER. Is that the only reason for not charging it on your books—that you get the weight from the hospital?

Mr. LYMAN. Yes, sir.

#### TESTIMONY OF MR. GEORGE E. BAXTER.

GEORGE E. BAXTER, being duly sworn, was examined, and testified as follows:

The CHAIRMAN. Mr. Baxter, are you employed over at St. Elizabeth's?

Mr. BAXTER. Yes, sir.

The CHAIRMAN. How long have you been there?

Mr. BAXTER. Eighteen years.

The CHAIRMAN. What part of the hospital have you been employed in for the last three or four years?

Mr. BAXTER. For the last two years I have been employed as a carpenter. Previous to that I was employed as elevator man and meat man—dishing meats. I served sixteen years in the general kitchen, part of the time in the butcher shop, and part of the time in the kitchen, serving meats.

The CHAIRMAN. You say you are a carpenter?

Mr. BAXTER. Yes, sir.

The CHAIRMAN. Had you been a carpenter before you went to the hospital?

Mr. BAXTER. Yes, sir.

The CHAIRMAN. Is that your trade?

Mr. BAXTER. Yes, sir; I worked at the trade very near three years before I went to the institution at all.

The CHAIRMAN. Do you live at the hospital?

Mr. BAXTER. No, sir.

The CHAIRMAN. Did you live there when you were employed in the kitchen?

Mr. BAXTER. Yes, sir; that is, before I was married. After I was married I lived in Anacostia.

The CHAIRMAN. And subsequent to that you—

Mr. BAXTER. I had my room there; yes, sir.

The CHAIRMAN. Did you ever have anything to do with the meat inspection when the meat came in?

Mr. BAXTER. Yes, sir.

The CHAIRMAN. There was a witness here the other day by the name of Borroughs, who testified that the meat that came into the hospital was almost invariably underweight.

Mr. BAXTER. Under weight?

The CHAIRMAN. Yes; under weight; that when the contract would call for meat to weigh 600 pounds it almost invariably weighed much less than that. I think he said as little as 400 pounds.

Mr. HAY. He said 450.

Mr. BAXTER. The steward that always inspected the meat—that is, the man that receives the meat, who is the steward—any meat that came under weight he would always send back.

The CHAIRMAN. When you were weighing there did you send it back if it weighed less than 600 pounds?

Mr. BAXTER. I really can't say that any of that ever come under my notice, because, as I say, I was only relieving in there when the regular butcher was out. The regular butcher, you know, would have days and vacations—regular days in the month, you know, Sundays, etc.—and I would relieve when he would go out. I don't think there was ever any sent back under weight when I was working in the shop. I don't remember it if there was.

The CHAIRMAN. When you were relieving the steward did you weigh the meat?

Mr. BAXTER. Yes, sir.

The CHAIRMAN. How much did the carcass of fresh meat usually weigh?

Mr. BAXTER. Why, usually from 700 to 800 pounds—all the way from 650. Well, we didn't weigh it. We only weighed it by the quarter. The way we used to weigh the meat the hind quarter of beef usually ran from 150 to 160 and sometimes 165 pounds. We used to weigh them in quarters. They would come up in so many hind quarters, and we would weigh those together and the fore quarters we would weigh together. We never used to weigh them separately. We used to weigh three and four at a time.

The CHAIRMAN. You did not weigh them when they first came in?

Mr. BAXTER. Mr. French used to always do that—the steward.

The CHAIRMAN. Where you weighed them was after that?

Mr. BAXTER. When they were served to the house.

The CHAIRMAN. Served to the kitchen?

Mr. BAXTER. Yes.

The CHAIRMAN. After they had been in the butcher shop?

Mr. BAXTER. Mr. French used to weigh them when they came in. He received them from the meat wagons.

The CHAIRMAN. He would cut them up and send them to you?

Mr. BAXTER. I used to cut them up and hang them on the racks and weigh them out to the house—that is, to the kitchens. I hadn't anything to do with weighing them when they came from the wagons.

The CHAIRMAN. What do you think of the quality of the meat furnished?

Mr. BAXTER. I think it is good.

The CHAIRMAN. Did you ever have any occasion to complain about any of this meat that you handled as being unsound or bad?

Mr. BAXTER. No, sir; only corned beef. I have had considerable trouble with corned beef at times.

The CHAIRMAN. What did you do when you found any of it was bad?

Mr. BAXTER. Where it was inspected as they received it, it was always returned bad. The bad beef was always sent back. I would handle the meat twice after it was served to the kitchen, and on some occasions I would run across a bad piece of corned beef after it had been cooked. Of course it is almost impossible where there is bad corned beef to get at every little piece that is not exactly right. I used to dish it out of the kettles where there was from 800 to 1,200 pounds cooking in one kettle. I would dish it out of that and inspect it as I taken it out, and when I would serve it I would serve it in boxes about so square [indicating], so much to each ward, and I

would inspect it again. If I ever found a bad piece, a blood bruised or any kind of a bad piece of beef, I always would throw it out. I never would serve it to the ward. That was my orders.

The CHAIRMAN. So that your inspection was made entirely outside of Mr. French's department?

Mr. BAXTER. Yes, sir.

The CHAIRMAN. Did you often have occasion to find that this meat which had been received from Mr. French's department was not good?

Mr. BAXTER. It was very seldom that I ever found a piece that was bad. Once in a while, I say, in the corned beef, when I was dishing it out I would find a bad piece. When the cattle is alive, they get bruises, and when they are killed that blood congeals and stays in that one little spot. When the beef is corned, that bruise still stays there. It is cooked, and you can't tell much about it really until it is cooked, and it is a very bad-looking piece of beef. Sometimes a piece like that will get in, and, of course, whenever I would come to a piece like that I would always throw it out.

I never would serve it. It is almost a matter of impossibility, where you find an assignment of beef from 1,800 to 2,000 pounds—they always used to cook from twelve to fourteen hundred pounds of it in one day—and, as I say, it is possible that a piece of bad meat would get in the lot; but I know a piece of bad meat never was received if it was detected before it got in.

The CHAIRMAN. This condition, where an animal has been bruised before it is slaughtered, sometimes can not be possibly determined until after the meat is cooked?

Mr. BAXTER. Until after the meat is cooked. Sometimes then you won't see it until you cut into it. Sometimes where the meat is cut before it is corned, if it should happen to be cut across the edge of that bruise, it will show; but if that bruise is in the bulk of the beef you will hardly see it unless you inspect it very close. That is my experience in the corned beef.

Mr. SMYSER. In cooking a piece of that kind with other meat that is good, how does it affect the good meat?

Mr. BAXTER. That would not have any effect on the good meat unless it was really spoiled. If the piece of beef was spoiled and smelled bad, it would spoil the rest of it. It would make the other smell in that way.

Mr. HAY. How long has it been since you had anything to do with this meat?

Mr. BAXTER. It will be two years this coming September.

Mr. HAY. Therefore you do not know anything with regard to it since that time?

Mr. BAXTER. Only what I have seen come on the table where I eat.

Mr. HAY. Where do you eat?

Mr. BAXTER. I eat in the attendants' dining room, where the majority of the male attendants eat, on the west side—what is known there as the west side.

Mr. HAY. Do you get the same food as everybody else gets out there?

Mr. BAXTER. As they do in that dining room.

Mr. HAY. I mean, is the food served to the attendants the same as the food served to the inmates?

Mr. BAXTER. I can't exactly say. I haven't been in the kitchen to see how it was served; but the attendants' food there is a little changed in the cooking. There is a little difference. There is one cook that cooks for the employees and there is other cooks that cook for the inmates; but, as a rule, the inmates are fed practically as good as the employees. I have been around the different wards. I have seen different wards served. I have been in there at meal times, and really in some of them I have seen a great deal better food on the table than I have seen on my own.

Mr. HAY. What wards are those?

Mr. BAXTER. There is one ward there, the L building.

Mr. HAY. Is that a hospital ward?

Mr. BAXTER. No, sir; that is not a hospital ward. That ward I was in some time ago when they were serving dinner, and I thought the meat looked very nice. Of course you know what a prime rib roast is. That is about as good a part of the beef as you will get.

Mr. HAY. Is it?

Mr. BAXTER. And they had prime rib roast, good coffee, good bread, etc.

Mr. HAY. What sort of a ward is the L building?

Mr. BAXTER. Sir?

Mr. HAY. What character of people are in the L building, male or female?

Mr. BAXTER. Female.

Mr. HAY. It is a female ward?

Mr. BAXTER. A female ward; yes, sir.

Mr. HAY. What do you know as to how to inspect the beef? Where did you find out about it?

Mr. BAXTER. Why, in inspecting corn beef they——

Mr. HAY. I want to know where you got your experience.

Mr. BAXTER. All the experience I have had in the meat was at that institution. I was taken there by the butcher when I first went there eighteen years ago. I was there about a year, and he took me as the man to relieve the butcher.

Mr. HAY. Could you tell whether the beef or the corned beef have had any articles used on them to preserve them—any preservaline, or anything of that sort? Could you tell whether anything of that kind had been used?

Mr. BAXTER. Only saltpeter. That is the only experience I have had there with preserved meats.

Mr. HAY. You could only tell if they used saltpeter?

Mr. BAXTER. Yes, sir.

Mr. HAY. If they used anything else you could not tell?

Mr. BAXTER. I don't know of anything else they have used. I have heard there was other stuff used, but I have had no experience with that at all.

Mr. HAY. Suppose they do use it; do you know sufficiently about the inspection of beef to tell whether it was used on it or not?

Mr. BAXTER. No, sir; I don't believe I could. I don't know anything about it other than saltpeter. I know when saltpeter is used.

Mr. HAY. Did you ever see any saltpeter used?

Mr. BAXTER. In some assignments of corned beef saltpeter had been used into it.

Mr. HAY. Was that sent back?

Mr. BAXTER. No, sir; because the beef was practically good.

Mr. HAY. Did you ever see where saltpeter had been used on any other kind of beef?

Mr. BAXTER. No, sir.

Mr. HAY. What is the general character of the food at the institution served to the inmates?

Mr. BAXTER. It is fairly good.

Mr. HAY. What do you mean by fairly good?

Mr. BAXTER. Well, it is not of the very best, and it is not of the worst. I have seen better, and I have seen worse. To go into details, I might say that they serve good potatoes, good meats, good bread, and, as has been stated here, oleomargarine. They have various fresh vegetables in season. They have string beans, green peas, cabbage, beets, onions, and various vegetables, and, as I said, I consider it fairly good food. I have been living off of it now for eighteen years, and I can't say that I have ever suffered for anything to eat while I was there.

#### TESTIMONY OF MISS A. M. HARDY.

Miss A. M. HARDY, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Miss Hardy, you are employed at St. Elizabeth's, are you not?

Miss HARDY. Yes, sir.

The CHAIRMAN. How long have you been employed there?

Miss HARDY. Twenty-two years.

The CHAIRMAN. What is your position now?

Miss HARDY. I am now the chief clerk, and my duties are of a financial nature.

The CHAIRMAN. Financial clerk?

Miss HARDY. Yes, sir.

The CHAIRMAN. Do you keep the books, do you mean?

Miss HARDY. Yes, sir.

The CHAIRMAN. Do you also disburse the moneys?

Miss HARDY. Yes, sir.

The CHAIRMAN. Do you draw checks that are signed?

Miss HARDY. Not all; some. I have an assistant who draws some of the checks.

The CHAIRMAN. How long have you occupied your present position?

Miss HARDY. Since November, 1901.

The CHAIRMAN. That is, you were appointed in Doctor Richardson's time, were you?

Miss HARDY. I was promoted in Doctor Richardson's time.

The CHAIRMAN. What were your first duties at the hospital? Have you always been in the clerical department?

Miss HARDY. When I first went I went as a copyist.

The CHAIRMAN. You have always been connected with the office?

Miss HARDY. Yes, sir.

The CHAIRMAN. Not directly with the patients?

Miss HARDY. No, sir; I have never had anything to do with the patients.

The CHAIRMAN. Miss Hardy, testimony was given here the other day that a Mrs. Lendner, who was the mother of Frank Briggs, had spent more in taking care of her son at the hospital than the amount of pension that she received. Do you know anything about that case?

Miss HARDY. There is nothing but an amount less than \$3, which was taken from the patient's person, charged to his personal account. She never paid any board, according to the books. There is no record of it.

The CHAIRMAN. If she had paid there would be a record of it, would there not?

Miss HARDY. Undoubtedly.

The CHAIRMAN. Is Briggs there now?

Miss HARDY. Yes, sir.

The CHAIRMAN. How long has he been there?

Miss HARDY. I think he was admitted in 1893. I have a memorandum here.

The CHAIRMAN. Very well, use your memorandum.

Miss HARDY. He was admitted May 18, 1893.

The CHAIRMAN. And you say during all the time between 1893 down to date there has been nothing paid whatever for his personal account?

Miss HARDY. Nothing whatever, except what Mr. Fenning has paid as guardian.

The CHAIRMAN. How much is that, do you know?

Miss HARDY. Yes; Mr. Fenning paid \$78.50 from September 12, 1904, to December 31, 1904.

The CHAIRMAN. Is anything being paid for him from any source now—for this man Briggs?

Miss HARDY. Nothing but the pension.

The CHAIRMAN. How much is the pension?

Miss HARDY. He gets \$10 a month.

The CHAIRMAN. How is that pension entered upon the books?

Miss HARDY. It is simply entered to his credit.

The CHAIRMAN. And five-sixths of it goes to the hospital, does it not?

Miss HARDY. It does by law, but none of it has been turned over to the hospital yet; it is simply standing on the books.

Mr. SMYSER. To his credit?

The CHAIRMAN. To his credit. How much is standing there now?

Miss HARDY. His pension was drawn the 4th of March, 1905, up to date. That is five quarters, is it?

The CHAIRMAN. Yes; for five quarters.

Miss HARDY. \$150.

The CHAIRMAN. Has any cash ever been furnished to Briggs by the hospital?

Miss HARDY. By his mother?

The CHAIRMAN. No; by the hospital.

Miss HARDY. By the hospital to him?

The CHAIRMAN. Yes.



Miss HARDY. No; he has never called for any. Do you mean from his pension?

The CHAIRMAN. Yes.

Miss HARDY. No. Mr. Fenning has placed \$25 to his credit from some money that he has in his hands.

The CHAIRMAN. Where did Mr. Fenning get the money he placed to his credit?

Miss HARDY. I presume he got it as guardian.

The CHAIRMAN. Do you know this patient, Briggs?

Miss HARDY. Do I know him? No.

The CHAIRMAN. You have never seen him? You know nothing of him except from the books?

Miss HARDY. No, sir.

Mr. HAY. Miss Hardy, how many clerks are there?

Miss HARDY. Altogether?

Mr. HAY. Altogether; yes.

Miss HARDY. Eight or nine, not including stenographers.

Mr. HAY. How many stenographers are there?

Miss HARDY. Three, I think.

Mr. HAY. How are the clerks paid? What is their salary?

Miss HARDY. How are they paid, do you mean?

Mr. HAY. Yes.

Miss HARDY. Annual salaries.

Mr. HAY. How much does each of them receive?

Miss HARDY. My salary is \$1,500; my time clerk gets \$65 a month; a ledger assistant gets \$60; the bill clerk gets \$50; the pension clerk gets \$100, and his assistant gets \$65.

The CHAIRMAN. Do all of these clerks stay out there at the hospital—get their board there, etc.?

Miss HARDY. They get one meal. I don't think they all stay. Some of the stenographers remain.

Mr. HAY. All of them, though, you say, have a meal a day at the hospital?

Miss HARDY. Yes, sir.

Mr. HAY. Do you know as to how the salaries that they receive compare with the salaries that are received by clerks in the other branches of the Government for doing the same kind of work?

Miss HARDY. I think they are rather low. I have never noticed, but I think they are.

Mr. HAY. Miss Hardy, I would like to know how Mr. Briggs's pension and other pensions go into the funds of the hospital?

Miss HARDY. That drawn under the act of February 20, do you mean?

Mr. HAY. Yes.

Miss HARDY. None of it has ever been turned in, and I don't know that they have decided just how it will go in. I presume we have to have authority from the Secretary of the Interior before we can turn it in.

Mr. HAY. What I want to know is whether that is spent on the soldiers themselves who draw the pension, or whether it goes into the general funds of the hospital for the general care of all the people there?

Miss HARDY. It is supposed to when it is turned in.

Mr. HAY. It is supposed to do what?

Miss HARDY. It is supposed to go to their general care.

Mr. HAY. General care?

Miss HARDY. Yes.

Mr. HAY. So that patients from the District of Columbia would get a part of that for their care the same as the soldiers, would they not?

Miss HARDY. I presume so—why, no; the District of Columbia pays the board for all their patients.

Mr. HAY. I understand that; but then besides what you received from the appropriations for the patients from the District of Columbia, and besides what you receive under the sundry civil bill for the treatment and care of soldiers, the hospital still has this fund of five-sixths of the pension, as I understand it?

Miss HARDY. I presume so. That is the intent of the law.

Mr. HAY. For the entire hospital?

Miss HARDY. Yes, sir.

Mr. HAY. Has any fund belonging to these old soldiers been turned in at any time for the general use of the hospital?

Miss HARDY. Never.

Mr. HAY. How is it used? Is it used for each individual soldier who draws it?

Miss HARDY. We have a personal account and a pension account. I don't know which one you mean.

Mr. HAY. What I want to get at is how it is used for these soldiers?

Miss HARDY. The act of February 20—

Mr. HAY. No; I mean before that.

Miss HARDY. Before that? It was given to them to spend as they liked, and extra clothing was purchased. If they desired clothing better than the hospital furnished it was furnished from their own funds.

Mr. HAY. Is that done on the order of the superintendent or the application of the patient?

Miss HARDY. I don't know.

Mr. HAY. Does not that all pass through your hands?

Miss HARDY. It all passes through my hands, but I have nothing to do with it until the approved bill comes to me.

Mr. HAY. Who is that approved by?

Miss HARDY. The assistant physician approves the bill.

Mr. HAY. The assistant physician in whose ward the patient is?

Miss HARDY. Yes, sir.

The CHAIRMAN. Miss Hardy, do I understand you to say that the final disposition of this fund which is in your possession under this recent act is awaiting an order from the Secretary of the Interior?

Miss HARDY. I don't know just how that will be. We have not made any attempt to turn it into the hospital fund as yet. I do not know just how it will be, but we will probably get permission from them or ask instructions before we turn it in.

Mr. HAY. How much is that? Do you know?

Miss HARDY. Now standing on the book?

Mr. HAY. Yes.

Miss HARDY. I think about \$130,000 now, altogether—their one-sixth and the hospital's.

Mr. HAY. That has been accumulating for a year, has it?

Miss HARDY. Since March 1, 1905.

Mr. HAY. Over a year?

Miss HARDY. What is that?

Mr. HAY. Do you know why some steps have not been taken by the superintendent, or by whomever it ought to be taken, to dispose of that money?

Miss HARDY. We have not had occasion to use it yet. We have not needed it.

Mr. HAY. In whose hands is it?

Miss HARDY. The Treasurer of the United States.

Mr. HAY. It is in the Treasury, is it?

Miss HARDY. Yes, sir.

Mr. HAY. Subject to whose order?

Miss HARDY. Doctor White's, as agent.

Mr. HAY. Doctor White as agent for these soldiers?

Miss HARDY. For the patients; yes, sir.

Mr. HAY. You have seen no order, have you, of the Secretary of the Interior with regard to the fund?

Miss HARDY. I beg your pardon?

Mr. HAY. I say, you have seen no order of the Secretary of the Interior with regard to this fund?

Miss HARDY. No, sir.

#### TESTIMONY OF MISS ELIZABETH A. FITZPATRICK.

Miss ELIZABETH A. FITZPATRICK, being duly sworn, was examined and testified as follows:

The CHAIRMAN. How long have you been employed in St. Elizabeth's?

Miss FITZPATRICK. Six years; since 1899. It has been six years and a half.

The CHAIRMAN. What are your duties there?

Miss FITZPATRICK. My present position is that of head supervisor.

The CHAIRMAN. How long have you been head supervisor?

Miss FITZPATRICK. One year last March.

The CHAIRMAN. What building are you in?

Miss FITZPATRICK. I have charge of all the buildings in the institution—all the female department.

The CHAIRMAN. You are head supervisor of all the female department?

Miss FITZPATRICK. Of all the female department; yes, sir.

The CHAIRMAN. How many employees are you responsible for?

Miss FITZPATRICK. I am responsible for—there are 85 of us all. We have 70 nurses, 12 waitresses, 2 supervisors, and 1 head nurse—85 altogether, and I am responsible for the entire corps.

The CHAIRMAN. I thought Miss Tanquary was responsible for the nurses.

Miss FITZPATRICK. Miss Tanquary is responsible for the training of those nurses and the carrying out of the doctors' orders and so forth.

The CHAIRMAN. When you say you are responsible for them all, if any complaints were made against nurses or attendants, would they be brought to your attention?

Miss FITZPATRICK. Well, yes; yes, sir. Of course sometimes, too,

Miss Tanquary would have her attention called to it, but as a rule I settle all the difficulties. That comes under me.

The CHAIRMAN. Do you have many difficulties?

Miss FITZPATRICK. Well, I have had; yes, sir.

The CHAIRMAN. What kind of difficulties?

Miss FITZPATRICK. Well, I don't know that I could hardly go into detail; it is too long a story; but different people did not like me, and all that sort of thing—did not approve of my appointment, and so forth.

The CHAIRMAN. How long have you been head supervisor?

Miss FITZPATRICK. One year last March.

The CHAIRMAN. When you say difficulties you mean personal criticism of you?

Miss FITZPATRICK. Yes; personal criticism of me. I have had very little difficulty with the nurses carrying out my orders and all that sort of thing. It is all rather personal, I think.

The CHAIRMAN. How is that last part?

Miss FITZPATRICK. The difficulties I have had have all been of a personal nature.

The CHAIRMAN. They have not had anything to do with the treatment of the patients, have they, by the nurses or by the attendants?

Miss FITZPATRICK. Oh, no.

The CHAIRMAN. It was merely a question of detail that some of them did not like their boss?

Miss FITZPATRICK. Yes.

The CHAIRMAN. What do you think in regard to the sufficiency or the number of attendants and nurses?

Miss FITZPATRICK. I do not know what we would do if we had any more. I think we have quite sufficient throughout the institution. It is my duty to appoint nurses to the different wards and see that we have a proper number there, and during vacations and days and Sundays off to supply those wards. It is my duty to see to all that.

The CHAIRMAN. You do not entirely agree with Miss Tanquary that six additional nurses would be advantageous?

Miss FITZPATRICK. I think it would be rather a luxury, more than anything else, to have quite so many. I think as it is we are quite well supplied. We have a very competent corps of nurses indeed—all good girls.

The CHAIRMAN. Have there been any complaints brought to your notice relative to their hours in that service?

Miss FITZPATRICK. Not exactly to my notice, but I have heard it. It has been talked of throughout the institution, but the hours are not as long as I have had to work in other institutions.

The CHAIRMAN. What other institutions have you worked in?

Miss FITZPATRICK. I have worked at the Bay View Asylum in Baltimore, and our hours there were very long, and our time off was not half the time off that we have here at this institution. The rules were very rigid, and we were not really allowed outside of the institution at all during the week; outside of the gates we were not allowed. At St. Elizabeth's we enjoy the freedom of going out when we are off duty. We can go away from the institution and we get a great deal more time off there.

The CHAIRMAN. Is there any difficulty when the women nurses or attendants have had an evening out about getting back into the hos-

pital—about getting the key? There has been some testimony here relative to the necessity of their going to the night watchman, and if he is not on hand having to wait for an hour or so.

MISS FITZPATRICK. Yes; that is always the case in the hospital. If the night physicians are on the wards they are supposed to wait until their return to be given the key to enter the nurses' hall.

THE CHAIRMAN. They are told when they go out for an evening, usually, to get back at 10 o'clock, are they not?

MISS FITZPATRICK. Yes; except one evening in the week they are excused until 12 o'clock, and on this evening, of course, they have to have a key to get in the nurses' home.

THE CHAIRMAN. Is there any difficulty if they get back at 10 o'clock?

MISS FITZPATRICK. Oh, no. The nurses' home is never locked until quarter past 10, and they always are allowed fifteen or twenty minutes. The home is supposed to be locked at 10, but we never lock it until fifteen or twenty minutes after 10. The nurses who are out in the evening are supposed to be back, but sometimes they are delayed by a car, or something like that, and do not get in on time.

THE CHAIRMAN. And the only difficulty about getting in is at the nurses' home, when they have been excused until 12 o'clock?

MISS FITZPATRICK. Yes, sir.

THE CHAIRMAN. Suppose they get there exactly at 12 o'clock, as they are supposed to. Then is there any difficulty about getting a key immediately?

MISS FITZPATRICK. Yes; sometimes the physicians have been called to the wards. An accident case may happen; you never know when at a large institution, and sometimes the physicians have been called to the ward at 12 o'clock, and are not back for some time, perhaps, and they have to wait then until he returns.

THE CHAIRMAN. Could that difficulty be obviated in some way?

MR. SMYSER. Give each of them a key, and that would obviate it.

MISS FITZPATRICK. Then they would come in at 2 or 3 o'clock in the morning.

MR. SMYSER. That would not do, would it?

MISS FITZPATRICK. We could not trust all the nurses. We can trust them, but we have a few young ones, you know, and they would probably come in at 1 or half past 1. It has happened at the institution since I have been there.

MR. HAY. What is the objection to their having a key?

MISS FITZPATRICK. They would not come in at 12 o'clock, as they are expected to. They might remain out an hour later. I have known nurses to remain away from the institution all night, and no one would ever know whether they were in or not unless there was some restriction placed on them. They are not in the institution now—those nurses—but they have been there.

MR. SMYSER. That is a matter of discipline, and is necessary?

MISS FITZPATRICK. Yes, sir; and it is not as rigid as it is in other institutions where I have worked.

MR. SMYSER. Do you think the patients who are attended by the nurses that you have described here in any way suffer for want of proper attention?

MISS FITZPATRICK. Absolutely no, sir; never. If we have any patient who requires extra attention a special nurse is supplied day

and night. We have had suicidal cases, and we have always supplied two nurses. We had one last summer for four months. She had a special nurse day and night, and in other cases—physical diseases, where it is necessary to have two nurses—we have always supplied them—always. There are several instances that I could tell you of where we have supplied two nurses for just one patient.

Mr. HAY. When one patient has a special nurse, does that not take away from the others?

Miss FITZPATRICK. Well, yes; in a way it does, but it takes away from patients who do not require that amount of attention, who get along very well with less, and then we have ordered extra nurses at such times, when it was necessary.

Mr. HAY. So that at times you do employ more than you have ordinarily at the hospital?

Miss FITZPATRICK. Yes, sir; we have employed some since I have been in the institution. Last summer we had two or three extra nurses employed, more than our number.

Mr. SMYSER. In an emergency?

Miss FITZPATRICK. Yes, sir; in an emergency, where we have, probably, a suicidal case or a case of typhoid, or something of that sort, that would require the attention of a nurse day and night.

Mr. HAY. Where are they drawn from?

Miss FITZPATRICK. Pardon me?

Mr. HAY. From where are they drawn? Where do they come from?

Mr. BARCHFELD. Where do you get your special nurses?

Miss FITZPATRICK. Oh, from the hospital.

Mr. HAY. What hospital?

Miss FITZPATRICK. St. Elizabeth's.

Mr. HAY. I mean when you have to employ extra nurses, where do you get them?

Miss FITZPATRICK. From the civil-service list; from the list of applicants.

Mr. HAY. You have a civil-service list of nurses?

Miss FITZPATRICK. You understand—I can not quite understand it—but we have a number of applicants, and from one out of three of them the Civil Service Commission approves an applicant and usually sends one.

Mr. HAY. Do I understand that they have to have a civil-service examination?

Miss FITZPATRICK. In answering questions, yes sir.

Mr. HAY. All nurses?

Miss FITZPATRICK. Yes; it is not very hard—just answering questions.

Mr. HAY. On application?

Miss FITZPATRICK. Yes; on application.

Mr. HAY. You say you have all the attendants you need?

Miss FITZPATRICK. Yes; we have all we need. Just at the present time we are well supplied.

Mr. HAY. You could not use any more without—

Miss FITZPATRICK. Well, it would be easy. We could use them, but we do not need them.

Mr. HAY. You do not need them?

Miss FITZPATRICK. No; we do not need them.

Mr. HAY. Is it true that occasionally some of them are out on their vacation, and one nurse has to do what two would have to do?

Miss FITZPATRICK. Yes, sir; they have. I have done it myself. All of us have to do that, from the physicians down, during vacation time.

Mr. HAY. In taking care of the patients of that kind ought they not to be taken care of all the time in the same way?

Miss FITZPATRICK. They are taken care of all the time in the same way.

Mr. HAY. Can one person do as much work as two?

Miss FITZPATRICK. They do double duty.

Mr. HAY. Why do they not do double duty all the time? Why do you not get rid of half of them?

Miss FITZPATRICK. It is just two weeks' vacation time, you know, and very often we relieve where it is necessary. We take from another ward where it is easier and put a nurse on a hard ward, you know, if that nurse happens to be away.

Mr. HAY. How many patients are there in each ward, on an average?

Miss FITZPATRICK. Well, in C 1 at the present time there are 20, on C 2 there are 22, and on C 3 and C 4—

Mr. HAY. I want the average.

Miss FITZPATRICK. In C building there are 89 patients, in the four wards.

Mr. HAY. About 20 to a ward?

Miss FITZPATRICK. About 20 to a ward.

Mr. HAY. How many attendants have you?

Miss FITZPATRICK. We have 10 on day duty in that building and we have 4 on night duty.

Mr. HAY. What is the class?

Miss FITZPATRICK. The class of patients?

Mr. HAY. Yes.

Miss FITZPATRICK. In two of the wards we have an acute class and on the ward above we have the chronic class.

Mr. HAY. How many have you in the two wards where you have the acute class?

Miss FITZPATRICK. There are 3 on each ward—3 nurses on each ward.

Mr. HAY. What have you to say of the food there, Miss Fitzpatrick?

Miss FITZPATRICK. The food is very good.

Mr. HAY. Don't you ever hear any complaint of it from attendants or from patients?

Miss FITZPATRICK. Well, the patients very rarely ever complain, but of course the attendants complain sometimes. But the patients rarely ever complain. They seem to have sufficient—all they want.

Mr. HAY. How is that?

Miss FITZPATRICK. They seem to have all they want.

Mr. HAY. And the only complaint of the food comes from the attendants?

Miss FITZPATRICK. Well, yes; and then of course sometimes it is general, but as a rule they do not complain of the food.

The CHAIRMAN. How large is the Bay View Institution where you were?

Miss FITZPATRICK. The insane department is not very large. I think there are 400 or 500 patients there, but the poorhouse was connected with it and I do not know anything about that at all. I was in the insane department.

Mr. SMYSER. How does the food at St. Elizabeth's compare with the food at Bay View?

Miss FITZPATRICK. There is no comparison. There they didn't get anything but soup and bread. At St. Elizabeth's we have everything. Bread and soup was all they got.

Mr. SMYSER. At Baltimore?

Miss FITZPATRICK. Yes, sir.

Mr. HAY. How long ago was that?

Miss FITZPATRICK. That was six years ago. I do not know what improvements have been made since with regard to the food. When I was there, in the morning they had bread—good bread—and coffee, and the working patients had butter and meat. At dinner time they had soup—good vegetable soup—and bread, and the working patients might have potatoes. At supper time they had tea and bread, and sometimes little cookies—ginger snaps, and rice and something of that sort.

Mr. SMYSER. So, from your actual experience there and here, you say the food is much better here?

Miss FITZPATRICK. Oh, yes; very much better.

Mr. SMYSER. As you expressed it, there is no comparison?

Miss FITZPATRICK. Yes.

Mr. SMYSER. What do you say as to the attention and care that the patients receive here as compared with the care and attention they receive at Bay View?

Miss FITZPATRICK. There is no comparison. They are well treated there, too, but we have more recoveries at St. Elizabeth's. They get more attention in every way. The nurses are trained better. We have more physicians there and all the modern improvements in the way of treatment. At Bay View we did not have them. It was rather an old institution and things were not modern.

Mr. HAY. What class of inmates have they at Bay View?

Miss FITZPATRICK. Well, I think—

Mr. HAY. Are they chronic, or what?

Miss FITZPATRICK. Some of them are acute and some chronic.

Mr. HAY. How many are there?

Miss FITZPATRICK. I think they had about 500 then. I am not sure as to the number—I think about 500.

Mr. WALLACE. You say you have everything in the way of food at St. Elizabeth's?

Miss FITZPATRICK. We have not everything, but we have nice food. We do not have every luxury.

Mr. WALLACE. How about fruit?

Miss FITZPATRICK. Oh, we do not get much fruit. We have strawberries, blackberries, and raspberries in season and other fruits in season occasionally. We may not have them every week, but frequently.

Mr. WALLACE. Is that on your ward?

Miss FITZPATRICK. All through the institution they have it.

Mr. WALLACE. Where do you get the fruit?



Miss FITZPATRICK. Throughout the institution in the fruit season. At stated times we have blackberries, raspberries, and strawberries.

Mr. WALLACE. How about bananas and oranges?

Miss FITZPATRICK. Oh, no; we do not have those. We get them occasionally for sick patients, when they request.

Mr. WALLACE. Do you have apples?

Miss FITZPATRICK. No; we don't have apples as a rule. Oh, yes, we do. We have apples sometimes at supper time and sometimes at dinner through the winter.

Mr. HAY. What kind of apples are they? Dried apples?

Miss FITZPATRICK. We have dried apples, too, sometimes, but I mean raw apples. We have raw apples frequently throughout the winter.

Mr. HAY. You say you get strawberries. Do you get them every day?

Miss FITZPATRICK. Oh, no, sir; we do not get them every day. We get them at different times through the season—through the strawberry season.

Mr. HAY. You only have them at times?

Miss FITZPATRICK. At times. Perhaps twice a week, and sometimes oftener than that.

Mr. HAY. And that is true of the raspberries and blackberries?

Miss FITZPATRICK. Raspberries and blackberries the same.

The CHAIRMAN. You have grapes in season, too, do you not?

Miss FITZPATRICK. We have lots of grapes; yes, sir.

Mr. SMYSER. Were you on a male ward in 1904?

Miss FITZPATRICK. I have been on male wards at different times; yes, sir.

Mr. SMYSER. I am requested to ask you if you then did not think you had not sufficient help, when you were in the annex?

Miss FITZPATRICK. We had plenty of help in the annex. I never had such a good time in the institution as I had there. I didn't work hard at all there. We had plenty of help. There were four or five attendants and three nurses.

Mr. HAY. What is the annex?

Miss FITZPATRICK. It is one of the male hospital wards. Doctor Stoner was in charge when I was there. We always had plenty of help.

Mr. SMYSER. Did you make any complaint that you had not sufficient help?

Miss FITZPATRICK. No, sir; never.

Mr. WALLACE. If they were all like you they would not need much help there?

Miss FITZPATRICK. I don't know. Of course everybody is entitled to their own opinion. I think as it is we have plenty.

Mr. WALLACE. Have you been keeping up with the testimony in this case?

Miss FITZPATRICK. I have been away. I have kept up with the greater part of it.

Mr. SMYSER. You do not think it is necessary to have two people bite one cherry, do you?

Miss FITZPATRICK. No.

Mr. HAY. You have been there six years, you say?

Miss FITZPATRICK. Six years last November—six years and a half I have been employed there.

Mr. HAY. When did you return? You have been away, have you not?

Miss FITZPATRICK. Yes, sir. I returned last Thursday and was on duty Friday morning.

Mr. HAY. How long had you been away?

Miss FITZPATRICK. Two months.

Mr. WALLACE. Were you promoted before you left the hospital?

Miss FITZPATRICK. Yes, sir; I was promoted a year ago in March.

Mr. BARCHFELD. What was your position when you came to the institution in 1899?

Miss FITZPATRICK. I was an attendant.

Mr. BARCHFELD. What was your salary then as an attendant?

Miss FITZPATRICK. Fourteen dollars.

Mr. BARCHFELD. Did you attend the lectures, and when did you graduate as a nurse from the institution?

Miss FITZPATRICK. Well, the training school started. I went there in November, and the training school started the following February. I was in the first class, and I graduated the following year, 1901, I think—May, 1901.

Mr. BARCHFELD. That made you a graduate nurse at the institution?

Miss FITZPATRICK. Yes, sir.

Mr. BARCHFELD. What was your salary then?

Miss FITZPATRICK. My salary then was \$30. After we graduated we were all given an increase of \$5, on May 30.

Mr. BARCHFELD. Did you ever take a special course in surgery?

Miss FITZPATRICK. Yes, sir.

Mr. BARCHFELD. When?

Miss FITZPATRICK. I took a special course two years ago last May.

Mr. BARCHFELD. Where?

Miss FITZPATRICK. In the Polyclinic Hospital in Philadelphia.

Mr. BARCHFELD. How long were you taking that special course?

Miss FITZPATRICK. Three months.

Mr. BARCHFELD. You had leave of absence?

Miss FITZPATRICK. For three months; yes, sir.

Mr. BARCHFELD. From Doctor White?

Miss FITZPATRICK. Yes, sir.

Mr. BARCHFELD. When you came back, what was your position then at the hospital?

Miss FITZPATRICK. My position then was not as good as the one I held when I went away. I was head nurse in a ward, and when I came back I was not head nurse. I worked under another nurse.

Mr. BARCHFELD. What was your salary then?

Miss FITZPATRICK. The same.

Mr. BARCHFELD. Thirty dollars?

Miss FITZPATRICK. \$30.50. I worked on a male ward when I came back, and we were given \$2.50 additional for male hospital wards.

Mr. BARCHFELD. What is your salary at the present time?

Miss FITZPATRICK. Forty dollars.

Mr. BARCHFELD. You were away for some two months, were you not?

Miss FITZPATRICK. Yes, sir.

Mr. BARCHFELD. What were you doing abroad?

Miss FITZPATRICK. Well, I went away for a rest, and then I took a patient abroad.

Mr. BARCHFELD. You took a patient? That is what I want the committee to know.

Miss FITZPATRICK. I took a patient across to France.

Mr. BARCHFELD. If it is a fair question, what did your patient or the patient's guardian allow you for your services while you were abroad?

Miss FITZPATRICK. I was allowed \$100 for my services going across, for six days and ten hours, and I was given \$115 to pay my way back from across. My way over was \$180. My ocean fare across cost \$180, and of course they did not give me that. I was given \$215—\$100 for my services and \$115 for defraying my expenses back.

Mr. BARCHFELD. Was your salary going on while you were taking this special course at the Philadelphia Polyclinic Hospital?

Miss FITZPATRICK. No, sir; my salary stopped at the institution, of course, and I worked for nothing. I was not allowed anything at all. I was just given my board and part of my washing—part of my laundry. I paid for most of it.

Mr. BARCHFELD. How does your nurses' dormitory over there compare with the nurses' dormitory at Bay View?

Miss FITZPATRICK. Over at St. Elizabeth's?

Mr. BARCHFELD. Yes.

Miss FITZPATRICK. At Bay View we had just the white scrubbed floors—you mean the floors?

Mr. BARCHFELD. No; I mean the dormitory as a whole.

Miss FITZPATRICK. Our dormitory at St. Elizabeth's is very much better, of course. Everything is much better. At Bay View we had just the white floor, scrubbed with sand, and we had plain beds and mattresses. The beds were not as good. Everything was clean, just as clean as could be, but everything is much better at St. Elizabeth's.

Mr. BARCHFELD. You have visited other hospitals which have nurses' dormitories in connection with them?

Miss FITZPATRICK. Yes, sir.

Mr. BARCHFELD. Is there any nurses' dormitory that you know of in the United States that can compare with the nurses' dormitory at St. Elizabeth's?

Miss FITZPATRICK. The nurses' home at St. Elizabeth's?

Mr. BARCHFELD. The dormitory.

Miss FITZPATRICK. Where the nurses sleep—the room?

Mr. BARCHFELD. Yes.

Miss FITZPATRICK. At the Polyclinic in Philadelphia we had a nice home. It was much smaller, but quite pretty—just as good as at St. Elizabeth's. We had a very nice nurses' room. Of course it was not as large as at St. Elizabeth's, and everyone did not enjoy single rooms. Most of the nurses—not all of them—but some of the nurses at St. Elizabeth's have a single room. At the Polyclinic there were two or three in a room.

Mr. BARCHFELD. Did the nurses have their trunks in the rooms at the Polyclinic dormitory?

MISS FITZPATRICK. No. They were given two days to empty their trunks and get them to the trunk room. We were not allowed to have any boxes in the room.

MR. BARCHFELD. At the Polyclinic?

MISS FITZPATRICK. At the Polyclinic you are allowed to have your trunk two weeks before you leave, to pack, but you are allowed no boxes, trunks, or suit cases in the room.

MR. BARCHFELD. Do you not think a trunk in the room would be rather unsightly in any well-regulated hospital?

MISS FITZPATRICK. I certainly do.

MR. BARCHFELD. At our homes we generally dispose of them and put them in the attic. There has been serious complaint by one, Miss Herbert, that she was not permitted to have her trunk in her room.

MISS FITZPATRICK. Yes, sir. In any well-regulated hospital I do not think the trunks are allowed in the rooms. I know at the Polyclinic they were not allowed in the rooms, and I think it is because these nurses have not been around, and have not seen other hospitals, and have not lived there that they complain.

#### TESTIMONY OF JAMES GODDARD.

JAMES GODDARD, being duly sworn, was examined and testified as follows:

THE CHAIRMAN. What is your position at St. Elizabeth's?

MR. GODDARD. I am one of the supervisors there in the receiving department.

THE CHAIRMAN. How long have you been there?

MR. GODDARD. Seven years this March gone.

THE CHAIRMAN. How long have you been a supervisor?

MR. GODDARD. Two years this April past.

THE CHAIRMAN. Which one of the buildings are you employed in?

MR. GODDARD. I am in the receiving department.

THE CHAIRMAN. Did you know a man by the name of Belt?

MR. GODDARD. Yes, sir.

THE CHAIRMAN. He was an attendant, was he not?

MR. GODDARD. Yes, sir.

THE CHAIRMAN. Did you know a patient by the name of Butts?

MR. GODDARD. Yes, sir.

THE CHAIRMAN. Mr. Belt testified that when Butts was lying in bed with a broken leg two different attendants maltreated him and disturbed him by lifting up his leg and letting it fall on the bed, and other things of that character. Do you know anything about such things?

MR. GODDARD. No, sir; I do not; only what I have heard that has gone through the committee here. That is all.

THE CHAIRMAN. Were you supervisor at the time Belt was there—between December 11, 1905, and March 27, 1906?

MR. GODDARD. Yes, sir. I was the one that preferred charges against him for being drunk.

THE CHAIRMAN. Where did you find Belt drunk?

MR. GODDARD. I found him down in the sitting room lying on one of the couches there asleep at half-past 6 in the morning.

The CHAIRMAN. To whom did you make a report of this occurrence?

Mr. GODDARD. I reported it to the other supervisor, Mr. Burch, that was with me, at first, and we reported to the doctor later.

The CHAIRMAN. The doctor in charge of that ward?

Mr. GODDARD. Yes, sir; Dr. Stack.

The CHAIRMAN. Had you ever known him to be drunk before this?

Mr. GODDARD. On one occasion before that he was called up and reprimanded about it. That morning I went in and found the condition he was in and demanded his keys. He wanted to take his coat off and put up a fight that morning, but Mr. Burch was there and walked in between us, and he quieted down and gave up his keys then.

Mr. HAY. Did you find him yourself, or did some one call your attention to it?

Mr. GODDARD. The man in charge of the ward, he called my attention to it. At least, I asked when I went through where he was, and he told me he was in there laying down. I went in there and found him asleep.

Mr. HAY. Who was that?

Mr. GODDARD. Mr. Belt.

Mr. HAY. I know, but who told you?

Mr. GODDARD. I asked Mr. Teates, the man in charge of the ward, where he was, and he told me.

Mr. HAY. Mr. Teates did not report to you until you asked where he was?

Mr. GODDARD. I had just gone in, and as soon as I went in I asked. He would have reported to me if I had not asked him.

Mr. HAY. How do you know he would?

Mr. GODDARD. He always did. He did before.

Mr. HAY. Reported to you before about this man?

Mr. GODDARD. Yes.

Mr. HAY. What had he reported to you before about him?

Mr. GODDARD. When he was drinking before; at the time he was reprimanded once before.

Mr. HAY. Why was he not discharged before?

Mr. GODDARD. I don't know why. He was not really full, or drunk, or anything of that kind. He was just drinking, and he was reprimanded about it.

Mr. HAY. Do you keep people about there who drink?

Mr. GODDARD. No; not as a general thing we don't.

Mr. HAY. How did you happen to do it in this case?

Mr. GODDARD. I don't know why it was.

Mr. HAY. You reported it to the physician in charge?

Mr. GODDARD. Yes, sir.

Mr. HAY. What did you do to him? Anything?

Mr. GODDARD. They reprimanded him about it and told him if it ever occurred again he would have to go.

The CHAIRMAN. Mr. Goddard, the name of the attendant whom Mr. Belt accused of having tormented this man Butts was Allen?

Mr. GODDARD. Yes, sir.

The CHAIRMAN. Was Allen under you?

Mr. GODDARD. Yes, sir.

The CHAIRMAN. Was there ever any complaint made about him in regard to maltreating any patient?

Mr. GODDARD. No, sir. I consider Mr. Allen about one of the best attendants that was there.

Mr. HAY. He is still there, is he?

Mr. GODDARD. Yes, sir. I never had no complaint from any attendant or any patient about him.

The CHAIRMAN. Did you know this man Butts? Do you remember him as a patient?

Mr. GODDARD. Yes, sir.

Mr. SMISER. Knowing Mr. Allen as you do, do you believe he would maltreat Butts in the way described?

Mr. ALLEN. No, sir; I do not.

Mr. HAY. Mr. Goddard, I suppose patients could be illtreated there and you not know anything about it?

Mr. GODDARD. That may happen occasionally, sure.

Mr. HAY. And when you say you do not think that this man was illtreated you just say that on the general idea you have of what goes on there?

Mr. GODDARD. Yes.

Mr. HAY. Of course, you do not know?

Mr. GODDARD. No. Of course, if there was anything of the kind reported to us we always reported to the doctor in charge, and the man as a general thing is discharged.

Mr. HAY. But if it is not reported to you?

Mr. GODDARD. Of course, we could not do anything. We would not know anything about it.

Mr. HAY. The attendants are frequently on the wards with these people when you do not happen to be there? You can not be at every spot on time?

Mr. GODDARD. Certainly not.

Mr. HAY. And the attendant is sometimes in charge there; and there is not anyone else there?

Mr. GODDARD. Yes.

Mr. HAY. That is true?

Mr. GODDARD. Yes, sir.

Mr. HAY. How is the food out there? What do you think about that?

Mr. GODDARD. Well, I haven't got any complaint to make of the food. I always found it very good.

Mr. HAY. You are under Doctor Stack, are you?

Mr. GODDARD. Yes, sir.

Mr. HAY. You say you have no complaint to make of the food?

Mr. GODDARD. No, sir.

Mr. HAY. Do you think you have sufficient attendants?

Mr. GODDARD. Well, I think we have in one way. If there was none of them going out for vacations or anything of that kind we would have enough. I think we ought to have two or three extra ones in case the attendants go out on vacation.

Mr. HAY. You think you ought to have two or three extra ones?

Mr. GODDARD. In case of them going on vacations and things.

Mr. HAY. If they all stayed there all the time you would have enough?

Mr. GODDARD. Yes.

Mr. HAY. But you think if one goes out on vacation some one ought to be put in his place without having to leave some other ward?

Mr. GODDARD. Yes. There may be two or three out on vacation, and two or three more may be taken sick at the same time.

Mr. HAY. What do you think of the hours?

Mr. GODDARD. Well, of course the hours are not as long at that institution as they are at some hospitals. They are a little long, I think.

Mr. HAY. I am not talking about any other institution, and I am not comparing this with any other institution, and I do not intend to compare it with any other institution, and I do not care what they do in any other institution. We are investigating this institution.

Mr. GODDARD. I think myself the hours are a little long.

Mr. HAY. You think the hours are a little long?

Mr. GODDARD. Yes, sir.

Mr. HAY. Do you think the long hours, 14 hours, I understand, one day and 12 hours one day——

Mr. GODDARD. Yes.

Mr. HAY (continuing). Tend to make the attendants irritable by reason of having to be there 14 hours at a time?

Mr. GODDARD. I should say it would.

Mr. HAY. You should say it would?

Mr. GODDARD. Yes.

Mr. HAY. Do you think those long hours make the attendants tired—that they get worn out?

Mr. GODDARD. Yes, sir.

Mr. HAY. They do. You get the same food, I suppose, as the inmates, do you not?

Mr. GODDARD. Yes, sir; practically the same.

Mr. HAY. You have the same food as they have on your ward for the patients?

Mr. GODDARD. Yes.

Mr. SMYSER. What do you know about the hours in other institutions?

Mr. GODDARD. Well, I don't know nothing about them; only what I have heard them say. That is all. I have never been in one of them, and I never worked in one of them.

Mr. BARCHFELD. Were you ever connected with any other institution?

Mr. GODDARD. No, sir; I never was.

Mr. BARCHFELD. You do not know anything about any other institutions?

Mr. GODDARD. No.

Mr. BARCHFELD. You do not know whether the help there work eight hours, ten hours, twelve hours, or fourteen hours, do you?

Mr. GODDARD. No, sir.

Mr. BARCHFELD. How can you make a comparison, then?

Mr. GODDARD. I did not make no real comparison. I said no more than what I have heard people say. Of course, I don't know for certain, because I never worked in one. St. Elizabeth's is the only one that I have ever been in.

Mr. BARCHFELD. Have your attendants ever complained to the superintendent of the hours being too long?

Mr. GODDARD. No; I never did.

Mr. BARCHFELD. Then, why do you come before this committee and complain they are too long?

Mr. GODDARD. I just answered the questions asked me. Of course, I never had occasion to go to the doctor about it.

Mr. BARCHFELD. How long have you been there?

Mr. GODDARD. I have been there seven years this March coming.

Mr. BARCHFELD. What was your salary when you entered the institution?

Mr. GODDARD. Eighteen dollars.

Mr. BARCHFELD. What are you getting now?

Mr. GODDARD. Fifty dollars.

Mr. BARCHFELD. Do you know any other place where you could make \$50 any easier?

Mr. GODDARD. How is that?

Mr. BARCHFELD. You do not know of any other place where you could make \$50 any easier, do you?

Mr. GODDARD. No; I don't know as I do.

#### TESTIMONY OF ROBERT HOGAN.

ROBERT HOGAN, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. How long have you been at St. Elizabeth's?

Mr. HOGAN. I have been there eight years.

The CHAIRMAN. Have you left there now?

Mr. HOGAN. Yes, sir.

The CHAIRMAN. When did you leave?

Mr. HOGAN. Last November.

The CHAIRMAN. Why did you leave?

Mr. HOGAN. To accept another position.

The CHAIRMAN. What are you doing now?

Mr. HOGAN. I am a mail clerk in the city post-office.

The CHAIRMAN. Did you take the civil-service examination for mail clerk?

Mr. HOGAN. Yes, sir.

The CHAIRMAN. One of the witnesses has testified, Mr. Hogan, that in one of the wards—you were in Gray Ash ward, were you not?

Mr. HOGAN. Yes, sir.

The CHAIRMAN. Did you know a fellow there by the name of Daddysman, a patient?

Mr. HOGAN. Yes.

The CHAIRMAN. Daddysman testified that the first day he was there Bob Hogan, an attendant, said to him "I have a good notion to punch you." Did you ever say that to Daddysman?

Mr. HOGAN. No, sir.

The CHAIRMAN. You are sure of it, are you?

Mr. HOGAN. Certain.

The CHAIRMAN. Did you ever punch him?

Mr. HOGAN. No.

Mr. BARCHFELD. Did you punch anybody else?

Mr. HOGAN. No, sir.

The CHAIRMAN. In the hospital?

Mr. HOGAN. It is not impossible, but I didn't do it.

The CHAIRMAN. You misunderstood me. I said in the hospital. Did you ever carry a revolver when you were over at the hospital?

Mr. HOGAN. No, sir; never in my life have I carried a revolver.



The CHAIRMAN. Did you know of the testimony that this man gave—that you fired a revolver off in the ward one night?

Mr. HOGAN. Yes, sir; I read it in the Washington Post.

The CHAIRMAN. Is there any truth in it?

Mr. HOGAN. No, sir; not the least. I read also in the Congressional Record where he said that he had two black eyes, and that he was confined to bed for three days. I have never seen the patient have black eyes, and he had never been in bed while he was in Gray Ash ward.

The CHAIRMAN. Mr. Daddysman said you punched him and kicked him. Is that so?

Mr. HOGAN. No, sir.

The CHAIRMAN. He said he also saw toweling. Do you know what toweling is?

Mr. HOGAN. No, sir. I have heard something about it.

The CHAIRMAN. Did you ever see things of the kind done—anything that they call toweling done over there at the hospital?

Mr. HOGAN. No, sir.

Mr. SMYSER. You say you did not shoot off that revolver?

Mr. HOGAN. No, sir. I did not have any revolver to shoot off.

Mr. SMYSER. I was just going to ask you what you would carry a revolver for if you didn't shoot it off. You say you did not have any?

Mr. HOGAN. No, sir.

Mr. SMYSER. Is this revolver story a fiction?

Mr. HOGAN. I guess it occurred in his brain. I never had a revolver in my life, and it would be foolish to have one in a violent ward, because it might be taken from me at any minute and turned on myself. Then I knew I would never use it.

Mr. SMYSER. Where did you live before you went over to the hospital?

Mr. HOGAN. In Washington, D. C.

Mr. SMYSER. How long have you been here?

Mr. HOGAN. Fifteen years.

Mr. WALLACE. How long had you been in the hospital?

Mr. HOGAN. Eight years, or nearly eight years—all but two weeks.

Mr. WALLACE. You never saw or heard of any toweling there?

Mr. HOGAN. No, sir.

The CHAIRMAN. Are you a drinking man?

Mr. HOGAN. No, sir.

The CHAIRMAN. You drink once in a while, do you not?

Mr. HOGAN. No. I have tasted it. I know the taste of beer. I have drunk beer, but not continuously.

The CHAIRMAN. Were you ever drunk over there at the hospital?

Mr. HOGAN. Never in my life.

Mr. SMYSER. What is your nationality?

Mr. HOGAN. Irish.

Mr. SMYSER. Don't you know what "bug juice" is?

Mr. HOGAN. Yes, sir.

Mr. SMYSER. Are you in the habit of getting drunk?

Mr. HOGAN. I don't think I could hold my present position if I was; and I don't think I could hold a position for eight years if I was in the habit of getting drunk.

The CHAIRMAN. There was a man by the name of La Rue, a patient. Do you remember him?

Mr. HOGAN. I do, sir.

The CHAIRMAN. He testified that you abused him. Did you ever abuse La Rue?

Mr. HOGAN. No, sir.

The CHAIRMAN. Did you ever abuse a patient in your life?

Mr. HOGAN. I did not.

The CHAIRMAN. Have you used any more force toward a patient than was absolutely necessary to protect the patient and to protect yourself?

Mr. HOGAN. No, sir.

Mr. BARCHFELD. Did La Rue ever abuse you?

Mr. HOGAN. No. I remember one time La Rue wanted to get away from me. I had taken him to what is called the "Center," and he wanted to get away while I was taking him back to his ward. Well, I called, I think, two more attendants, and we taken La Rue forcibly to the ward. He was not injured in any way whatever.

Mr. WALLACE. What means did you employ to restrain patients?

Mr. HOGAN. Well, if a patient gets violent I used usually to lock him up for a short time until he would quiet down.

Mr. HAY. What do you regard as necessary to protect yourself? How far would you have gone in protecting yourself?

Mr. HOGAN. I would go a great distance to protect myself.

Mr. HAY. I mean against a patient.

Mr. HOGAN. I would not let a patient injure me, by any means, if I could possibly help it, but I would not use any violence toward a patient. I have been struck by patients and have used no violence afterwards.

Mr. HAY. Mr. Hogan, this patient has testified that you shot off a pistol—what is his name?

Mr. HOGAN. Daddysman.

Mr. HAY. You say that while he was there he was not at any time in bed?

Mr. HOGAN. No, sir; not to my memory. Whenever I put a patient to bed the ward record would show it, and to my memory I have not put Daddysman to bed. If I put him to bed I was supposed to notify the attending physician. I do not remember it.

Mr. HAY. What have you to say about the food out there, Mr. Hogan?

Mr. HOGAN. I think it is very good.

Mr. HAY. Do you think they have sufficient attendants there?

Mr. HOGAN. There have always been sufficient attendants in every ward that I have been on. In the last ward I was in we had 4 attendants and 20 patients.

Mr. HAY. What was the character of those patients?

Mr. HOGAN. Well, some were excitable and some violent.

Mr. HAY. What ward was that?

Mr. HOGAN. That was Gray Ash ward.

Mr. HAY. A pretty bad class of patients were on Gray Ash ward, were they not?

Mr. HOGAN. Yes, sir.

Mr. HAY. What do you think about the time that you had to be there—fourteen hours and twelve hours a day you have to be on duty?

Mr. HOGAN. Well, I did not feel it very hard.

Mr. HAY. You did not?

Mr. HOGAN. No, sir.

Mr. HAY. You did not think it was too long?

Mr. HOGAN. We used to have patients out walking every morning, and sit out under the trees, and it is not like getting down to——

Mr. HAY. Hard work?

Mr. HOGAN. Hard work.

Mr. HAY. So you think fourteen hours is not too long?

Mr. HOGAN. Well, it is long; but in my case I did not feel it.

Mr. HAY. You think you could get along very well under it, and did get along very well under it?

Mr. HOGAN. Of course smaller hours would be much more convenient.

Mr. HAY. But I want to get at whether the longer hours had such an effect on the people that they could not give proper attention to the patients.

Mr. HOGAN. I do not think so.

The committee (at 11.55 o'clock a. m.) took a recess until 2 o'clock p. m.

AFTER RECESS.

The committee reassembled at the expiration of the recess.

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#### ADDITIONAL TESTIMONY OF DR. WILLIAM A. WHITE.

Dr. WILLIAM A. WHITE, having been heretofore sworn, resumed the stand and testified as follows:

The CHAIRMAN. Doctor White, relative to this pension money that is now in the Treasury of the United States under your order as superintendent, has there ever been any discussion between you and the Secretary of the Interior as to what should be done with that?

Doctor WHITE. No, sir; the law provides fully what is to be done with it. The reason it still stands to my credit as agent is largely this: When the law was passed the Secretary appointed a committee to make rules for putting it into operation, and we found that it was an extremely complicated affair, and it took us nine months to make those rules, working steadily all the time.

The reason it took us so long was that it was necessary to get a number of decisions of the Attorneys-General and a number of de-

cisions of the Comptrollers on different points. After we got those rules—nine months following the February when the law was approved—we started to apply them, and we found then that there were individual instances constantly coming up which were not covered by any of the rules, so that up to date there are still doubtful questions involved in the interpretation of the law, and until those questions are perfectly clear we have not felt like taking any action which might have to be rescinded. So we have let the matter rest until we could be perfectly clear as to what should be done.

The CHAIRMAN. Is it your idea that this amount of money is to be held for permanent betterments for the hospital?

Doctor WHITE. My idea is this, and this part is perfectly clear, that after certain expenditures are made in accordance with the law—no; there is a certain proportion of the pension money which, in accordance with the rules, is set aside for the purposes of the hospital to reimburse it for the pensioners' care and maintenance. Then, when the pensioner dies, if there is a balance remaining after all the expenditures under the law have been made that balance is given to the hospital. Those balances are covered into the general support fund of the hospital. That support fund is made up of a great many different items and the money that goes into that support fund loses its identity. It is simply the general support fund and it is used for the general purposes of the hospital.

The CHAIRMAN. What I am trying to get at is whether the annual amount that you have received from these pensions, which under this law goes to the hospital, will be annually used to decrease the appropriation to the hospital, or whether it will be used, in lieu of having an act passed, for permanent betterments.

Doctor WHITE. That matter has never come up at all. We are entitled to cover it into the general support. Until this present fiscal year there has invariably been a deficiency. The deficiency was due to the fact that the District government never paid its bills, so that the question has never come up as to whether this amount of money should be used in lieu of an appropriation or not. That remains, of course, for Congress to say.

The CHAIRMAN. That matter has not been determined?

Doctor WHITE. No, sir.

The CHAIRMAN. Either Congress will determine it or the Secretary of the Interior under this act can do practically what he chooses.

Doctor WHITE. He can do what he chooses. It will be covered in for the general purposes of the hospital.

Mr. HAY. Doctor, will you point me out in that law any provision which allows you to turn any part of that fund into the general fund of the hospital under any conditions? I have examined it carefully and I can not see that there is any such authority.

Doctor WHITE. Yes; I think this is it, Mr. Hay:

And such pension money shall be by said superintendent disbursed and used under regulations to be prescribed by the Secretary of the Interior for the benefit of the pensioner—

Mr. HAY. For the benefit of the pensioner?

Doctor WHITE. Yes; but if you will permit me, I will read further—

and, in case of a male pensioner, his wife, minor children, and dependent parents, or, if a female pensioner, her minor children, if any, in the order

named, and to pay his or her board and maintenance in the hospital; the remainder of such pension money, if any, to be placed to the credit of the pensioner, and to be paid to the pensioner or the guardian of the pensioner, in the event of his or her discharge from the hospital; or, in the event of the death of said pensioner, while an inmate of said hospital, shall, if a female pensioner, be paid to her minor children, and, in the case of a male pensioner, be paid to his wife, if living; if no wife survive him, then to his minor children; in case there is no wife or minor children, then the said unexpended balance to his or her credit shall be applied to the general uses of said hospital.

Mr. HAY. Yes; but it is only in that event.

Doctor WHITE. Yes; in that event. There are three classes of beneficiaries under the pension law—the wife, dependent parents, and minor children. In the event of the death or discharge of a pensioner who has such relatives then the money is paid, if he has not recovered, to his guardian, or if he has, to him or to these dependent relatives. If he dies and there are no such beneficiaries, under the pension act the money goes to the general purposes of the hospital.

Mr. HAY. But as long as he is there this pension goes to his benefit?

Doctor WHITE. It goes to his benefit, except, as you see here, it is provided that a certain proportion of it is intended to reimburse the hospital.

Mr. HAY. For his board and maintenance?

Doctor WHITE. Board and maintenance. It goes to the wife, dependent parents, and minor children in the order named, and we pay out every quarter to all the pensioners who have dependent relatives the pro rata portion of the pension which is due them. We do that every quarter. When the pension money comes in we immediately issue it in checks to these relatives.

Mr. HAY. Could you give us an idea of how much the hospital receives on account of this fund?

Doctor WHITE. We take in about \$100,000 a year in pensions.

Mr. HAY. How much of that is applied to the board and maintenance?

Doctor WHITE. We practically have not had any of that yet, for the reasons which I tell you. I presume when we have decided all the difficult points in this act we will probably get approximately \$20,000 a year out of that amount of money for the general purposes of the hospital. That includes all purposes, including board and maintenance and the occasional deaths of pensioners who have no dependent relatives, and so forth; but there is still pending in the Pension Bureau a number of cases that are undecided as to whether they have dependent relatives, wives living, and so forth. The Pension Bureau decides those all for us, because we have, of course, no machinery for getting that information.

Mr. HAY. Prior to this act of course you got the whole thing for the hospital?

Doctor WHITE. We got the whole thing; yes, sir. Where there were no beneficiaries under the act—no wife or dependent parents or minor children—the entire amount went to the hospital. As a matter of fact that never has been done except in isolated instances up to a couple of years ago, when Commissioner Ware asked me if I would not make a demand for that money, because they had a large surplus then in the Pension Department, and, as every man who keeps

books likes to have accounts closed, they wanted it closed up. They had the money to do it, and I made a demand for it, and the money was paid to the hospital. At the end of the year we turned that money back into the Treasury, and we got no money out of it. It was simply done to close the account. About \$30,000 was paid in the latter part of June.

Mr. HAY. Under that act you could not run the hospital on any smaller amount than you do now—that is, you would not ask for any smaller appropriation by reason of the amount you would receive under that act for the benefit of the hospital?

Doctor WHITE. I do not know. It would depend upon how much we would get. It would depend more on whether we would continue to get our full pay from the District. We have been doing it this year, and this is the first year. The District owes us approximately \$1,400,000 of money that they never paid for the care of their indigent patients.

Mr. SMYSER. They are likely to keep on owing you, too, are they not?

Doctor WHITE. They are not going to owe me any more.

Mr. SMYSER. In the past accounts, I mean.

Doctor WHITE. In the past accounts I do not see any way of getting it, perhaps; but it is a just debt. They ought to pay it. I do not know that it is worth while to bother about it, but I think we can make them pay from now on.

The CHAIRMAN. Does that mean that the United States Government has paid \$1,400,000 for the support of the hospital that is really owing by the District?

Doctor WHITE. No; it means that they paid half of that amount—that the District government should have divided that.

Mr. HAY. But if it was not paid over at the end of each fiscal year it was returned, was it not?

Doctor WHITE. It was what?

Mr. HAY. It was returned. It was turned back into the Treasury. For instance, they appropriate this year two hundred and twenty-odd thousand dollars.

Doctor WHITE. Yes.

Mr. HAY. At the end of the fiscal year, beginning July 1, 1907, if that sum has not been paid out, whatever remains of it will be covered back into the Treasury?

Doctor WHITE. It would be.

Mr. HAY. That has been done, I suppose, in past years?

Doctor WHITE. What has been done is this: In every year since 1881, which, I think, was the year when this arrangement was made with the District whereby the United States Government paid half of the expenses of running the District—every year since then, I think, without exception, there has been a deficiency at the hospital until last year. Now, for some unaccountable reason that I know nothing about that deficiency was made good by an appropriation in the sundry civil bill, of which the District stood no share; yet the deficiency arose largely because the District did not pay its bill, and it ought to have stood its pro rata share. It did not, however.

Mr. HAY. I judge from the chairman's question that he wanted to know whether they still had—

The CHAIRMAN. I wanted to know whether the District of Columbia had that?

Doctor WHITE. No; they have not got it.

Mr. HAY. They covered it back into the Treasury?

Doctor WHITE. No; they haven't got it.

Mr. HAY. They covered it back into the Treasury, as they do with every appropriation.

The CHAIRMAN. That is all right, then; I understand that.

#### TESTIMONY OF EDWARD L. MAENCHE.

EDWARD L. MAENCHE, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Maenche, how long have you been connected with the Government Hospital for the Insane?

Mr. MAENCHE. Seven years next August.

The CHAIRMAN. What was your position when you first went there?

Mr. MAENCHE. I was head of the laundry department.

The CHAIRMAN. Are you a laundryman by trade or by profession?

Mr. MAENCHE. Yes, sir; that is what I have been following.

The CHAIRMAN. Had you been in that business before you went to the hospital?

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. For how long?

Mr. MAENCHE. More than ten years.

The CHAIRMAN. More than ten years prior to going there?

Mr. MAENCHE. No; I have been in the business to exceed ten years all told.

The CHAIRMAN. Here in the city of Washington?

Mr. MAENCHE. No, sir.

The CHAIRMAN. Where were you?

Mr. MAENCHE. I was located in Ionia, Mich., and Jackson, Mich.

The CHAIRMAN. In connection with any institutions?

Mr. MAENCHE. Penal institutions.

The CHAIRMAN. What was your position when you first went to the hospital? Superintendent of the laundry?

Mr. MAENCHE. Yes, sir; I believe that is my official capacity there.

The CHAIRMAN. Do you hold that position now?

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. Are your duties to superintend all the laundry work that is done in the hospital?

Mr. MAENCHE. All the laundry work in the hospital; yes, sir.

The CHAIRMAN. How many employees have you?

Mr. MAENCHE. We have now 53—we did have when I left.

The CHAIRMAN. That is, paid employees—or does that include the patients?

Mr. MAENCHE. Paid employees.

The CHAIRMAN. How many patients are there?

Mr. MAENCHE. We work from 12 to 14 females, and it will average about 15 or 18 men; 20 now sometimes.

The CHAIRMAN. How many laundries are there over there?

**Mr. MAENCHE.** One.

**Mr. SMYSER.** Do you mean that there are 53 paid employees, or 53 including the patients who are located there?

**Mr. MAENCHE.** I mean 53 paid employees, including myself.

**The CHAIRMAN.** Then the patients you speak of are outside of the 53?

**Mr. MAENCHE.** Yes, sir.

**The CHAIRMAN.** There are some 25 or 26 of them, are there not?

**Mr. MAENCHE.** Yes; all of that—more than that.

**The CHAIRMAN.** Where is the laundry situated over there?

**Mr. MAENCHE.** Well, it is right near the—

**The CHAIRMAN.** What building is it in? Is there a separate building for the laundry?

**Mr. MAENCHE.** Well, I guess it is a separate building; yes, sir. It is right near the center lodge, or back of the engine house. It is near the water tank, if you know where that is.

**The CHAIRMAN.** What sort of a plant have you there? Is it a satisfactory one?

**Mr. MAENCHE.** Yes, sir; I think so.

**Mr. SMYSER.** It is not far from the laboratory, is it?

**Mr. MAENCHE.** No, sir; right back of the laboratory.

**Mr. SMYSER.** We passed it coming up there.

**The CHAIRMAN.** You say there are 53 paid employees under you?

**Mr. MAENCHE.** Yes, sir.

**The CHAIRMAN.** How many of those employees are men?

**Mr. MAENCHE.** Nine.

**The CHAIRMAN.** And the rest of them are women?

**Mr. MAENCHE.** Yes, sir.

**The CHAIRMAN.** Do you have anything to do with the selection of these employees?

**Mr. MAENCHE.** We select them from applications that are filed.

**The CHAIRMAN.** Is the selection made by you, or by the superintendent?

**Mr. MAENCHE.** It is made by me from the clerk over there, the civil service clerk.

**The CHAIRMAN.** Have you your full quota of employees now? Is that the regular number?

**Mr. MAENCHE.** Well, I have been away for three or four weeks, but I believe there is a full quota. There are six or seven girls there that I had not seen up to yesterday afternoon.

**The CHAIRMAN.** Are you back there now?

**Mr. MAENCHE.** Yes, sir.

**The CHAIRMAN.** Have you been away on sick leave, or have you had a vacation?

**Mr. MAENCHE.** I have been away. I was not feeling well, and I went home to Syracuse to visit my mother.

**The CHAIRMAN.** Well, Mr. Maenche, there was a witness by the name of Burroughs who testified that a man by the name of Sydnor and a man by the name of Worrell maltreated a German by the name of Alphonse Rollin, and that this maltreatment was while you were sitting at a table watching the two men abuse this Rollin, who was a German. Do you know anything about any occurrence of that kind?

**Mr. MAENCHE.** I know the patient. I remember the patient.

**The CHAIRMAN.** Did anything of that kind ever occur?



Mr. MAENCHE. Not to my knowledge. I never saw it.

The CHAIRMAN. Did you ever have any employees under you by the name of Sidnor and Worrell?

Mr. MAENCHE. Yes, sir; Millard Sidnor.

The CHAIRMAN. Is he there now?

Mr. MAENCHE. No, sir.

The CHAIRMAN. Do you remember why he left?

Mr. MAENCHE. He said he was going to Baltimore, I think, for a position there.

The CHAIRMAN. He left voluntarily, did he?

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. Was that so with Worrell, too? Did he leave voluntarily?

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. Was there an employee there by the name of Satterfield?

Mr. MAENCHE. Yes, sir; Harry Satterfield.

The CHAIRMAN. Was he under you?

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. Is he there now?

Mr. MAENCHE. No, sir.

The CHAIRMAN. What happened to him? Was he discharged, or why did he leave?

Mr. MAENCHE. Yes, sir; he was discharged.

The CHAIRMAN. Why was he discharged?

Mr. MAENCHE. It is claimed he was discharged for the abuse of patients. That is the charge, I believe, as I understand it.

The CHAIRMAN. Did you ever see him abuse a patient?

Mr. MAENCHE. No, sir; I did not.

The CHAIRMAN. Did you ever see any abuse of patients in your department there?

Mr. MAENCHE. No, sir; not to the extent of abuse. I have not seen it. I have seen where they have handled them, probably took hold of them to bring them over to their work, but I could not call it abuse in any sense of the word.

The CHAIRMAN. Did you ever see any patients knocked down by these trucks that you carry the clothing backward and forward on?

Mr. MAENCHE. No, sir; I have never seen them knocked down.

The CHAIRMAN. These trucks are run on rails, are they not?

Mr. MAENCHE. They are on four casters.

The CHAIRMAN. There is not any rail for the wheels?

Mr. MAENCHE. There is nothing to guide them. They push them wherever they want to.

Mr. SMYSER. There is no track for them?

Mr. MAENCHE. There is no track. They push them wherever they wish.

The CHAIRMAN. You say you never have seen any patients knocked into by one of these trucks purposely by an attendant?

Mr. MAENCHE. No; not bumped into. I have seen them as they came along simply glaze them, touch them, but not to do them any injury.

The CHAIRMAN. I mean purposely.

Mr. MAENCHE. No, sir; I never saw it done purposely by any of them.

The CHAIRMAN. Did you ever have any complaints of that kind?

Mr. MAENCHE. No, sir; not of that character.

The CHAIRMAN. Well, what kind of complaints have you ever had against the employees in your department?

Mr. MAENCHE. None until recently.

The CHAIRMAN. What do you mean by recently?

Mr. MAENCHE. In this last six months.

The CHAIRMAN. Name some of those, will you?

Mr. MAENCHE. There is one instance in connection with a patient by the name of Pat, as they call him. I believe his last name was Cronin. It was during the time that I had my difficulty over there relative to trying to dispose of a certain man that I had under me. There didn't seem to be any cases where anybody knew of any abuse of patients, not up until that time, and then I heard that Mr. Burroughs had made a remark—of course this is all hearsay. It comes from one of my girls, and of course I naturally paid attention to it. The remark was: "What do you think of Satterfield reporting"—let me see—"reporting," I will get his name in a minute. Well, I will think of the name—

The CHAIRMAN. All right.

Mr. MAENCHE. "What do you think of Satterfield reporting to the boss this man striking Pat Cronin?" It was reported to me by Satterfield. I did not see it. I will think of his name before I get through.

The CHAIRMAN. Never mind it. You spoke of this being at the time that you had your difficulty. What was your difficulty over there?

Mr. MAENCHE. I tried to have a man discharged from my department.

The CHAIRMAN. Who was the man?

Mr. MAENCHE. Mr. McMurray.

The CHAIRMAN. Mr. McMurray?

Mr. MAENCHE. Yes, sir; and I went through a long siege, what I considered it, before he was finally discharged.

The CHAIRMAN. Who did you go through a long siege with?

Mr. MAENCHE. I entered verbal complaints to the superintendent at various times.

The CHAIRMAN. What about? What did you accuse Mr. McMurray of doing?

Mr. MAENCHE. The excessive use of soap, for one thing.

Mr. SMYSER. Suppose you take your hand down, will you?

Mr. MAENCHE. It is very warm here.

Mr. SMYSER. Take your coat off if you want to—

Mr. MAENCHE. Yes; I will.

Mr. SMYSER. If you are too hot, because we will warm you up before we get through, maybe.

The CHAIRMAN. Will you tell us all about it? We want to know just what the trouble was.

Mr. MAENCHE. I had found and realized that this man McMurray, which he had at one time showed a tendency to work for the interests of my department and my interests for a long time. I found afterwards, which I realized, that I was safe in making these verbal charges to the superintendent because I was satisfied in my own mind that he was not, from what I had observed around from time to time.

For instance, influencing my help, and many other things—a person left in charge of my department when I was away on my vacation once before, which I didn't realize until a long time afterwards. I never made any report of it. He also treated her uncivilly; and, taking all in all, I consider that I had just and good reasons for entering these complaints.

The CHAIRMAN. What charges did you make against McMurray?

Mr. MAENCHE. These were all verbal charges I am speaking of now. I did prefer written charges against him.

Mr. SMYER. What were the verbal charges? Tell us.

Mr. MAENCHE. As I say, influencing my help, and also the excessive use of material, the excessive use of soap, which would overflow the wheels, and I considered it was not necessary. I do not know any other specific charges. I put in written charges.

The CHAIRMAN. What did you mean when you said he influenced your help? Do you mean against you, or against the institution, or what?

Mr. MAENCHE. I think against myself. I felt as though the results of my work did not show, that they did not try to get it out as good as it might be gotten out.

Mr. HAY. In order to discharge you, you mean?

Mr. MAENCHE. Sir?

Mr. HAY. In order to have you discharged?

Mr. MAENCHE. No, sir; I didn't consider that part of it. It was the results of my work I was looking after.

The CHAIRMAN. You say that the charges you made against McMurray were that he was improperly influencing your help against you. Is that what you mean?

Mr. MAENCHE. No, sir; I said that was in the verbal charge—

The CHAIRMAN. All right. The verbal charge is a charge.

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. Did you tell Doctor White that?

Mr. MAENCHE. I spoke to him at various times about it.

The CHAIRMAN. Did you tell him that at any time?

Mr. MAENCHE. That he was influencing the help?

The CHAIRMAN. Yes.

Mr. MAENCHE. I couldn't say positively.

The CHAIRMAN. Did you put that in your written charge?

Mr. MAENCHE. No, sir; I did not.

The CHAIRMAN. In your written charges the only charge you made against McMurray is that he was using too much soap.

Mr. MAENCHE. Was it the only charge?

The CHAIRMAN. Was that the only charge in writing that you made?

Mr. MAENCHE. Yes, sir; the only charge in writing; I believe that was.

The CHAIRMAN. Did you ever make any charges against McMurray at all in regard to cruelty to patients?

Mr. MAENCHE. Yes, sir; with intent to strike a patient. That is a written charge.

The CHAIRMAN. That is another charge. Was there anything else? You have spoken of the improper use of soap and the fact that he was trying to strike, or did strike, a patient. Now, was there another charge?

Mr. MAENCHE. Yes, sir. Being absent from duty without a reasonable excuse, without offering any excuse. And I also mentioned his language that he used toward me.

The CHAIRMAN. Yes; what was it? Was he profane?

Mr. MAENCHE. I considered it such.

Mr. SMYSER. Give us a specimen, and we will judge.

Mr. MAENCHE. It was relative to a patient that I wanted him to work there.

Mr. SMYSER. What did he say?

Mr. MAENCHE. He did not consider the patient was fit to work there, and he said he would be God damned if he would work him.

Mr. SMYSER. If he would work him?

Mr. MAENCHE. Yes.

The CHAIRMAN. What did you do then, when he made this remark to you?

Mr. MAENCHE. I told him then that it was only a case of him working him a few days, because he was going on his vacation, and it was only a case of him working him a few days, and I thought that he could get along with him for that length of time.

The CHAIRMAN. Did McMurray say he didn't think the patient was fit to work? Is that it?

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. What did you think about it?

Mr. MAENCHE. I felt as though I was satisfied and knew that the patient was fit to work at that work.

The CHAIRMAN. Did you think the patient was fit to work?

Mr. MAENCHE. He was fully capable of it, in my estimation.

The CHAIRMAN. You never made these patients work if they did not want to, did you?

Mr. MAENCHE. No, sir.

The CHAIRMAN. Was the patient objecting to work when McMurray said he would be God damned if he would work him?

Mr. MAENCHE. No; I had brought the patient down, and the patient stood there, and he had made no effort to put the man to work. The man is not a patient that you can tell to go and do something. You have to take him over and show him. You have to say, "Shake out sheets," "Shake it"—like that [illustrating]—"Shake out towels," or "Fold," whatever it may be; and the patient will go on and do it.

The CHAIRMAN. Was it because McMurray did not think the patient was fit to work that he did this?

Mr. MAENCHE. Presumably—in his estimation.

The CHAIRMAN. Did you think it would injure the patient to do this work, yourself?

Mr. MAENCHE. None at all. There were six or seven or eight other doing the same that I wanted him to do.

The CHAIRMAN. Was this patient willing to work?

Mr. MAENCHE. He never had offered any objections to working.

The CHAIRMAN. What was this patient's name? Was he the Pa Cronin you spoke of?

Mr. MAENCHE. No; his name was Thompson.

The CHAIRMAN. When did this trouble with McMurray begin?

Mr. MAENCHE. Eight months ago.

The CHAIRMAN. When was McMurray finally discharged?

**Mr. MAENCHE.** McMurray was discharged in the latter part of January, I think.

**The CHAIRMAN.** This year?

**Mr. MAENCHE.** This year; yes, sir.

**The CHAIRMAN.** Did you ever have complaints to make against anybody else that was under you?

**Mr. MAENCHE.** Oh, yes; I have made complaints at various times.

**The CHAIRMAN.** Tell us what they were, will you not?

**Mr. MAENCHE.** Well, I entered a complaint against a Mrs. Howard.

**The CHAIRMAN.** What did she do?

**Mr. MAENCHE.** I didn't consider that the discipline of my place was what it should be with her.

**The CHAIRMAN.** What position did Mrs. Howard have?

**Mr. MAENCHE.** She has worked at various jobs. I have had her at starching, taking away from the mangle. I place them wherever I think they will work to the best advantage.

**The CHAIRMAN.** Is Mrs. Howard there yet?

**Mr. MAENCHE.** Yes, sir.

**The CHAIRMAN.** Have you still cause of complaint against her, do you think?

**Mr. MAENCHE.** I have no complaint to enter now.

**The CHAIRMAN.** I do not know whether you have them to enter, but do you still think your complaint was right, and that you would rather have her get out?

**Mr. MAENCHE.** I do think so. I think I was justified in it.

**Mr. SMYSER.** What did she do—or didn't she do?

**Mr. MAENCHE.** Well, she disturbed my employees.

**Mr. SMYSER.** Well, disturbed does not mean anything. What do you mean?

**Mr. MAENCHE.** Agitating.

**Mr. SMYSER.** How did she agitate, now?

**Mr. MAENCHE.** By holding them up and meeting them and telling them tales that I did not think was any credit to me or to the department.

**Mr. SMYSER.** What did she tell?

**Mr. MAENCHE.** Well, I—

**Mr. SMYSER.** Give us a specimen of the tales she was telling.

**Mr. MAENCHE.** I believe she met Winnie Frazier one time.

**Mr. SMYSER.** Well, suppose she did meet her; what of it?

**Mr. MAENCHE.** Well, it is hard for me to recall, when I have so many people under me, and going through what I have been going through since the 1st of January.

**The CHAIRMAN.** What have you been going through? We want to know about it. Have you had trouble there with anybody else?

**Mr. MAENCHE.** I have had trouble since I started to discharge McMurray. He has been in my department morning, noon, and night. He has been in the institution, and he has been coming in contact with the people that work under my roof, and I know it has been no benefit to me.

**The CHAIRMAN.** You mean that he has been telling tales about you?

**Mr. MAENCHE.** He has been doing something. He has not been there for any good; I know that.

**The CHAIRMAN.** Why did you not get him discharged before

this, if you practically appoint these people yourself? That is, you take them from a list of applicants, and it seems to me it must be pretty easy for you to get rid of them if they do not suit you.

Mr. MAENCHE. I want the superintendent to be satisfied that there is not any prejudice on my part, and that is the reason I finally made written charges.

The CHAIRMAN. When was he discharged?

Mr. MAENCHE. January of this year, wasn't it?

The CHAIRMAN. Do you mean to tell me that he has been coming back to the place since he has been discharged?

Mr. MAENCHE. In the institution?

The CHAIRMAN. Yes.

Mr. MAENCHE. I have seen him there lots of times.

The CHAIRMAN. Have you seen him in the laundry since then?

Mr. MAENCHE. Yes.

The CHAIRMAN. Why did you not tell him to get out?

Mr. MAENCHE. I thought I would be overstepping my authority, probably. He was not there during working hours, and he would leave before my power started up. I do not consider that I had jurisdiction over him.

Mr. SMYSER. If he was there disturbing your people?

Mr. MAENCHE. He was there talking with Burroughs and Mrs. Howard and Ball and those people that have been up here to testify.

Mr. HAY. You say Mrs. Howard told these tales? What were the tales?

Mr. MAENCHE. Well, she tried—Winnie Frazier tells me that she tried to get her to say that she heard me swear at the mangle there while this investigation was going on of the abuse of patients by Doctor White. That is one thing; and I have had her in my office, and she has been very insubordinate with me.

The CHAIRMAN. Who? Mrs. Howard?

Mr. MAENCHE. Yes, sir. When I was trying to find out about the true facts of Satterfield abusing a patient, which I thought I had a right to do, she said I was not any lawyer and had no right to question her. Well, just along those lines, what I should call insubordination.

The CHAIRMAN. Why did you not make complaint against her?

Mr. MAENCHE. I had made a previous complaint about a year or so before.

The CHAIRMAN. What was the result of that?

Mr. MAENCHE. She was sent back to work in my department.

The CHAIRMAN. Do you and the superintendent get along well together?

Mr. MAENCHE. We always have.

The CHAIRMAN. Does it not occur to you that if you make complaints against people under you and for whom you are responsible, and the superintendent does not take proper notice of them, that you have a sort of occasion of complaint against the superintendent?

Mr. MAENCHE. No, sir; I don't feel that way.

The CHAIRMAN. Is that all you can tell about the occurrence with Mrs. Howard, that she said to Winnie Frazier—I don't know what she did say; the conversation with Winnie Frazier?

Mr. MAENCHE. She tried to induce Winnie Frazier to state before

the superintendent, when Satterfield was being tried, or when these charges were preferred against him of abusing patients—she tried to get Winnie Frazier to state that I was swearing, cursing, and that she had heard me curse; and she has made herself generally——

The CHAIRMAN. Obnoxious?

Mr. MAENCHE. Obnoxious; yes, sir.

Mr. SMYSER. Well, do you swear?

Mr. MAENCHE. Sometimes; I have to.

Mr. SMYSER. Are you like a fellow out in my country? Do you swear when you wash sheep, or when you don't wash sheep, or when? That fellow was asked when he drank whisky, and he said on two occasions—when he washed sheep and when he didn't. Are you in the habit of swearing over there?

Mr. MAENCHE. That was one of the hardest things I had to break myself of when I came here.

Mr. SMYSER. How well have you succeeded?

Mr. MAENCHE. Fine.

Mr. SMYSER. You do not rip out in the presence of the girls over there now and then?

Mr. MAENCHE. No, sir; I am very cautious about using any profanity in front of the girls.

Mr. SMYSER. Do you tolerate it?

Mr. MAENCHE. No, sir.

The CHAIRMAN. Now, Maenche, did you ever have any altercations—I do not mean fights, but any trouble with Burroughs?

Mr. MAENCHE. No; I had no trouble with Burroughs.

The CHAIRMAN. Was he under you at one time?

Mr. MAENCHE. Yes, sir; he worked in the wash room.

The CHAIRMAN. Did you ever have any row with him? Did you ever complain of his doing anything or not doing anything?

Mr. MAENCHE. I complained about him not washing the clothes clean. But these are not complaints. These are what I consider for the welfare of my department, and I go over at times and consult the superintendent about it and take his advice.

The CHAIRMAN. They are not improper complaints, but they are proper complaints.

Mr. MAENCHE. They are proper complaints; yes.

The CHAIRMAN. I suppose you told him, or at any rate you accused Burroughs of not washing the clothes properly?

Mr. MAENCHE. I brought the clothes over to the superintendent's office and showed them to him.

The CHAIRMAN. Did that make Burroughs mad?

Mr. MAENCHE. I don't know. I didn't ask him. No; I don't think it made him mad. He didn't say anything about it.

The CHAIRMAN. Did he do his work better after you had this conversation with the superintendent?

Mr. MAENCHE. Well, for a spell. He was not there but a very short time after that—a very few days.

The CHAIRMAN. Burroughs says you used to drink all the time; that you were frequently under the influence of liquor. How about that?

Mr. MAENCHE. I never drink anything while I am on duty, nor before going on duty.

The CHAIRMAN. Were you ever drunk on duty?

Mr. MAENCHE. No, sir.

The CHAIRMAN. Was there not a time when you were lying in the basement of the building intoxicated——

Mr. MAENCHE. No, sir.

The CHAIRMAN. Shut up in a small room down there, lying on the floor, drunk?

Mr. MAENCHE. No, sir.

The CHAIRMAN. Were you ever lying on the floor in a room, whether you were on or off duty—lying on the floor of a room in connection with the laundry, asleep?

Mr. MAENCHE. I have been in that room, sitting there, but not lying down.

The CHAIRMAN. Were you asleep?

Mr. MAENCHE. I would try to get to sleep, if I could.

The CHAIRMAN. Was this at the time you were supposed to be on duty?

Mr. MAENCHE. That was during working hours.

The CHAIRMAN. When you were trying to get to sleep downstairs?

Mr. MAENCHE. I tried to get to sleep if I could.

The CHAIRMAN. Was not that a funny thing for you to be doing during working hours?

Mr. MAENCHE. No, sir; I do not consider that it was.

The CHAIRMAN. Why not?

Mr. MAENCHE. Because I have been attacked with earache for years, and this man McMurray has been down in that basement with me in that dark room and tried to administer to me by blowing the smoke through the stem of a pipe into my ear. It is a dark room. I have also developed photographs down there, and Burroughs has tapped shoes down there. It is a sitting room for the men when they are not working, and from the noise and humdrum that I had from the machinery I went down there on two or three different occasions, suffering such as I did. It may have been after dinner; it may have been 11 o'clock in the morning. I can not tell what hour it was, but it was not from the effects of any intoxicating liquors.

The CHAIRMAN. Why, if you were ill, or if you were suffering in this way, would it not have been a comparatively easy thing for you to have gone to your room and gotten temporary leave for an hour or two?

Mr. MAENCHE. I see where it would not have been misconstrued now.

The CHAIRMAN. Would not that have been a better thing for you to have done?

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. Would there have been any difficulty about that?

Mr. MAENCHE. None. I presume that I had probably manifested a little bit too much interest in my department, maybe, to do so.

The CHAIRMAN. What do you mean—that you manifested too much interest about your end of the department?

Mr. MAENCHE. The whole interests of that department there I have felt very much encouraged over. That is, I have taken a great interest in it and manifested a great interest in it. If I went down there for an hour I don't know but what the department ran; and McMurray, as I say, and as he knows himself, that he has taken this pipe and blown smoke in my ear. I have had it done dozens of times by



men. It is immediate relief for me. It was not only done in this instance.

The CHAIRMAN. Burroughs says you were in the habit of getting drunk three or four times a week. Is that so?

Mr. MAENCHE. No, sir.

The CHAIRMAN. Are you in the habit of getting drunk when you are off duty and outside of that department, that place?

Mr. MAENCHE. Occasionally I would get what you call a "bat" on once in a while.

The CHAIRMAN. Has it ever interfered with your duties over there?

Mr. MAENCHE. No, sir; I go outside. I wouldn't stay in the institution.

Mr. SMYSER. How is that?

Mr. MAENCHE. I say this would occur outside of the institution.

The CHAIRMAN. Was that a habit of yours—going off and getting a "skate" on?

Mr. MAENCHE. No, sir; I don't consider that it was.

The CHAIRMAN. Did you ever read the rules and regulations, chapter 3, second half of paragraph 2, which says:

No profanity and no improper language by employees will be permitted. The use of intoxicating drinks of any kind while on duty is strictly prohibited, and its use to excess at any time, whether on duty or not, by an employee will be sufficient cause for removal?

(See page 1748.)

Mr. MAENCHE. Yes; I have read that.

The CHAIRMAN. Have you obeyed that regulation?

Mr. MAENCHE. Not to the letter.

Mr. SMYSER. As some gentleman said in the House, you swerved a little. Is that it?

Mr. MAENCHE. Well, I suppose I have.

The CHAIRMAN. Do you drink every day?

Mr. MAENCHE. No, sir.

The CHAIRMAN. Are you a regular drinker, so to speak?

Mr. MAENCHE. No, sir; I go weeks without it. Since I have been in the institution I have gone five months without a drink of anything.

The CHAIRMAN. This same man Burroughs said you offered all kinds of abuse to the women under you; that you called them all kinds of names. What have you to say about that?

Mr. MAENCHE. I will let them speak for themselves.

The CHAIRMAN. But what have you to say about it?

Mr. MAENCHE. I do not do it.

The CHAIRMAN. Did you ever do it?

Mr. MAENCHE. I have never done it.

The CHAIRMAN. Did you ever offer any indignities to three girls who were there in your room?

Mr. MAENCHE. No, sir; I had three girls in my office on one occasion. I was here when he testified to that day.

The CHAIRMAN. What is the fact about that occurrence?

Mr. MAENCHE. The fact about it?

The CHAIRMAN. Yes.

Mr. MAENCHE. The conditions were that the toilet room up there has only two seats in it, and complaints had been coming to me from the mending room to the extent that my girls were congregating—three, four, five, and six of them at a time—and I put a sign up in

there, by the request of the lady in the mending room, to the extent that no more than two people would be allowed in the toilet room at any one time; that the third one I would consider was in there loafing and wasting time. I found there was five of these girls—I saw the five come out myself. So I brought them in there and asked them if they paid any attention to the notice that had been in there, and they said that they had seen it up there; and I was asking them why they didn't pay attention to it, what the reason was for not living up to it. I got an explanation from the three of them, and that is all there was to that.

The CHAIRMAN. This is what Burroughs said in regard to the treatment of Rollin. He says: "They would take these heavy cars and run up behind them and knock them back, and they would fall on their shoulders"—"they" referring to the patients. Did you ever know of anything of that kind happening?

Mr. MAENCHE. No, sir; I never saw that.

The CHAIRMAN. Would you have stopped it if it had happened?

Mr. MAENCHE. I certainly would.

The CHAIRMAN. He says there was one patient named Michael Liston, who was very excitable and used severe language, and they would take a towel or a pillow case and beat him over the head. Did you ever see anything of that kind?

Mr. MAENCHE. No, sir.

The CHAIRMAN. Were you ever drunk on the grounds outside of the laundry?

Mr. MAENCHE. No, sir.

Mr. SMYSER. If you had a jag on when you reached the grounds, how would you get rid of it so quickly?

Mr. MAENCHE. Oh, I thought you meant—I would go in through and go to my room.

Mr. SMYSER. You meant that you never got drunk on the grounds?

Mr. MAENCHE. On the grounds; no, sir.

Mr. SMYSER. You do say you would come over to town sometimes and get a little full?

Mr. MAENCHE. Yes, sir; that is what I acknowledge.

Mr. SMYSER. And go back home?

Mr. MAENCHE. Yes, sir.

Mr. SMYSER. Were you ever so you could not navigate and get over there alone?

Mr. MAENCHE. No, sir.

Mr. SMYSER. Did you ever have a scrap in that little grocery store outside there with anybody when you were drunk?

Mr. MAENCHE. No, sir.

The CHAIRMAN. A fruit store.

Mr. SMYSER. Well, a fruit store, or something of that kind.

The CHAIRMAN. Did the man at that fruit stand ever tell you you could not go there any more?

Mr. MAENCHE. No, sir; I have still been going in there since this investigation has been going on, making my purchases just the same as ever.

The CHAIRMAN. Did you ever have occasion to reprimand an employee for treating a patient roughly?

Mr. MAENCHE. Yes, sir; Harry Satterfield.

The CHAIRMAN. Did Satterfield often treat patients cruelly, or any patient cruelly?

Mr. MAENCHE. No, sir; this was the first instance, and I raked him good and hard for it.

The CHAIRMAN. Was there anything like a habit on the part of the employees there to tease the patients—gibe at them and laugh at them?

Mr. MAENCHE. No; I can not say that there was. I do not see that it was. I have fooled with them myself.

The CHAIRMAN. How? What do you mean?

Mr. MAENCHE. For instance, there is one over there, this "Little Joe" that they refer to. He is under the impression that he is somewhat of a pugilist, and many a time before all of them we would stand up there like that and box before the whole of them. I wouldn't touch him, you understand, or hit him—just simply playfully; that is all it was.

The CHAIRMAN. You never saw this "Little Joe" teased and made mad, and then hit because he got mad?

Mr. MAENCHE. "Little Joe?" No, sir; I never saw it.

The CHAIRMAN. Or anybody else?

Mr. MAENCHE. No, sir; no, I never seen any abuse of any patients in my department. As I say, I wouldn't tolerate it.

The CHAIRMAN. Do you know a man by the name of Kletsch?

Mr. MAENCHE. He used to work in my department.

The CHAIRMAN. What became of him?

Mr. MAENCHE. He is over in the city somewhere, I believe—in the Agricultural Department.

The CHAIRMAN. Did he leave voluntarily?

Mr. MAENCHE. There was some trouble about him leaving. He was anxious to get into the engineer department, firing. He left my department and went down there without any permission from me, and we had to straighten that matter out before Doctor White, and finally he was sent back to work under me again, to finish out due notice, which we consider is two weeks. Then after that he went to firing.

The CHAIRMAN. That was the last that he was in your department?

Mr. MAENCHE. That he worked there; yes sir.

The CHAIRMAN. He says that he has brought you in so drunk that you couldn't walk, and he has done that several times—several nights. Is that true?

Mr. MAENCHE. No, sir; it is not true.

The CHAIRMAN. Did he drink himself?

Mr. MAENCHE. That I don't know. I couldn't say.

The CHAIRMAN. Did he ever help you across the grounds?

Mr. MAENCHE. No, sir; I didn't need any assistance when I came in there. If I did, I stayed over in town.

Mr. SMYSER. How is that?

Mr. MAENCHE. I say I don't come in in any such condition as that I need any assistance.

Mr. SMYSER. What about over in town?

Mr. MAENCHE. Sometimes I stay over in town.

Mr. SMYSER. Why?

Mr. MAENCHE. I may be late.

Mr. SMYSER. Any other reason?

Mr. MAENCHE. No; I don't know any other reason.

Mr. SMYSER. Drunk? Did that ever keep you over in town?

Mr. MAENCHE. No; I may have a couple of glasses too many and stay over.

Mr. SMYSER. How could you tell whether you just had a couple too many, to keep you over in town, so that you couldn't come over to the hospital to go to bed? What sort of a thermometer did you have by which to gauge your own intoxication?

Mr. MAENCHE. I can't gauge it by any thermometer.

Mr. SMYSER. Can you gauge it by the number of drinks you take?

Mr. MAENCHE. No, sir.

Mr. SMYSER. What do you drink when you do drink?

Mr. MAENCHE. Beer.

Mr. SMYSER. And whisky?

Mr. MAENCHE. Yes, sir.

Mr. SMYSER. And which do you prefer?

Mr. MAENCHE. According to what I want. I haven't any preference. I take either of them.

The CHAIRMAN. Kletsch says that you had cursed him up and down before half a dozen men and girls, and that you cursed the girls. Did you ever do that?

Mr. MAENCHE. No, sir; I never have, not since I have been in the institution.

The CHAIRMAN. He says you made him a liar on one occasion to Doctor White.

Mr. MAENCHE. Pretty near. [Laughter.]

The CHAIRMAN. What was Kletsch's duty there?

Mr. MAENCHE. He was in the wash room. He worked on the extractors.

The CHAIRMAN. Kletsch says that after you had this conversation about him with Doctor White you came in drunk one night and said to him that you had made a whole lot of trouble for him. Is that true?

Mr. MAENCHE. Said I had made a whole lot of trouble for Kletsch?

The CHAIRMAN. Kletsch said you came in drunk and told him that Kletsch had made a whole lot of trouble for you. That is it. Is that so?

Mr. MAENCHE. I don't remember what I said when I was drunk.

The CHAIRMAN. What?

Mr. MAENCHE. I don't remember it.

The CHAIRMAN. Did you ever tell Kletsch that he had made a whole lot of trouble for you?

Mr. MAENCHE. I can't remember that I ever did. I don't think that he has.

The CHAIRMAN. Did you ever think Kletsch had made a lot of trouble for you?

Mr. MAENCHE. No; I don't see where he has. This instance was not any trouble. It was simply routine business that had to be settled, and we went before Doctor White and settled it, and I am satisfied he got the true facts of the case and decided accordingly.

Mr. SMYSER. How old are you?

Mr. MAENCHE. Thirty-seven.

Mr. SMYSER. Married?

Mr. MAENCHE. No, sir.

Mr. HAY. You say you have 53 employees. How many females have you?

Mr. MAENCHE. Less 9.

Mr. HAY. Sir? How many females are employed, and how many males?

Mr. MAENCHE. Forty-six.

Mr. HAY. Forty-six females?

Mr. MAENCHE. Yes; and 9 men.

Mr. HAY. That is 55, is it not?

Mr. MAENCHE. Forty-six?

Mr. HAY. Forty-six and nine make fifty-five!

Mr. MAENCHE. I was just trying to figure how many men I have exactly. Nine men and 44 females.

Mr. WALLACE. Who was in charge of the laundry when you went off?

Mr. MAENCHE. Mrs. Leech when I came back yesterday.

The CHAIRMAN. Have you an employee there by the name of Lewis Taylor?

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. Is he there yet?

Mr. MAENCHE. Yes, sir.

The CHAIRMAN. Taylor said he saw Satterfield hit Liston with a towel and tease him and shove him around. Do you know anything about that?

Mr. MAENCHE. No, sir.

The CHAIRMAN. A Mr. Hayes has said a lot of things about you. Do you know a Mr. Hayes?

Mr. MAENCHE. I know two or three of them.

The CHAIRMAN. This man's name is Charles Hayes, and he resides at the greenhouse at St. Elizabeth.

Mr. MAENCHE. I know him.

The CHAIRMAN. I asked him what he knew about you, and he said you were a noted drunkard. What have you to say about that?

Mr. MAENCHE. I have nothing to say about what he says. I do not consider that I am.

The CHAIRMAN. What sort of a fellow is Hayes?

Mr. MAENCHE. I don't know.

The CHAIRMAN. What would lead him to say such a thing?

Mr. MAENCHE. I don't know. I haven't spoken four words with Hayes since I have been in the institution. I never speak to him, and he has not been in my department, it is safe to say, any more than half a dozen times to my knowledge.

Mr. HAY. Did you ever have any trouble with him whatever?

Mr. MAENCHE. None whatever. I never spoke to him, as I say. I never accost the man at all.

Mr. SMYER. How did he get that notion into his head?

Mr. MAENCHE. I haven't any idea.

The CHAIRMAN. He says: "There is that fellow Maenche. I have seen him dozens of times when he was under the influence of liquor, and upon my word, if I had a sister working in the laundry and he abused her like he does them it would have tempted me to fight him." Do you mean to say you have not spoken to a man who talks that way about you more than three or four times?

Mr. MAENCHE. I have not spoken to him more than three or four times. He can say whatever he wishes about me.

The CHAIRMAN. He says he has heard you talk harshly to the girls and abuse them around.

Mr. MAENCHE. I don't know when he heard it.

The CHAIRMAN. Did his duties take him into the laundry?

Mr. MAENCHE. Not at all.

The CHAIRMAN. What did he do out there?

Mr. MAENCHE. He worked for the florist, I believe. I believe he was night watch. I don't know.

The CHAIRMAN. Is he there yet?

Mr. MAENCHE. I have understood that he is not there. I only have it from hearsay.

The CHAIRMAN. Soper says you were very drunk; that you frequently came into the fruit store, and that at one time he told you he would try to break your jaw if you didn't get out. Do you remember any such conversation as that with Soper?

Mr. MAENCHE. No, sir; no such conversation. I remember one incident with him.

The CHAIRMAN. What was it?

Mr. MAENCHE. We chewed the rag for a little. It didn't amount to much, and a car came along and I came out and went up the hill. There were no threats made that he was going to throw me out. The strongest language that was used, as I recall, was that it was a question whether—he said I didn't know what I was talking about, and I wouldn't stand for it, because I thought I did at the time.

Mr. SMYSER. Were you drunk?

Mr. MAENCHE. No, sir; I was not drunk.

Mr. SMYSER. Had you been drinking on that occasion?

Mr. MAENCHE. I usually—I shouldn't wonder but I had had some drinks.

Mr. SMYSER. When you are under the influence are you boisterous and loud, or not?

Mr. MAENCHE. Why, I presume sometimes I am. It usually works me up to where I am kind of having a good time. If I am left alone I am not boisterous or noisy.

The CHAIRMAN. Maenche, there is a man by the name of Wilson Tyler. Do you remember him?

Mr. MAENCHE. Yes, sir; he is still over there.

The CHAIRMAN. He testified that you had advised him that the less he said at the investigation the better it would be for him. Did you ever say anything of that kind to Tyler?

Mr. MAENCHE. I did not.

The CHAIRMAN. Did you ever have any conversation with Tyler as to his testimony or what he was to testify about?

Mr. MAENCHE. Tyler has made a number of efforts to come in contact with me since this investigation has started, starting along the lines of our work, and he eventually would broach out something about the investigation. I have talked with all my people over there, because they come right under me every day, and it is almost impossible for me not to come in contact with them. But there is not one of them over there but what I have always advised them to tell nothing but the truth. I advised him also. I talked to him on several occasions relative to the investigation. The exact conversation is hard to recall, but I did not advise anybody to look out for

my interests, and I am fully satisfied that Doctor White can take care of his own.

I am up here frankly acknowledging that I do come over to the city, and I take a glass of beer or whisky, or two or three of them; and if I do, I am satisfied to take the results if I have not conscientiously fulfilled my duties over at the institution. That is all I say about that score. This is not the first time this accusation has come up against me.

The CHAIRMAN. When did it come up before?

Mr. MAENCHE. Under Doctor Richardson.

The CHAIRMAN. Was there any investigation made then about it?

Mr. MAENCHE. He called me into his office and asked me about the conditions, and so forth, and I explained them to him. I told him just as they occurred, just as I am telling here.

The CHAIRMAN. Have you had the general reputation of being a pretty hard-drinking man?

Mr. MAENCHE. I don't think I have. I have never lost a position through it yet. I have not drunk any more or any less here in this position than I have in any other position. I have never lost a position through it.

The CHAIRMAN. You know what a camisole is, do you not?

Mr. MAENCHE. Yes, sir; I have heard tell of them here.

The CHAIRMAN. Have you had any of those in the laundry?

Mr. MAENCHE. We have them down in the wash.

The CHAIRMAN. Many of them?

Mr. MAENCHE. Numbers. They vary at times.

The CHAIRMAN. How do they compare with what they were when you first went there, in numbers?

Mr. MAENCHE. There is nowhere near the number now that we used to have. We used to have a great number of them.

The CHAIRMAN. Did you ever have any conversation with any of the patients in regard to the food they got?

Mr. MAENCHE. Relative to the food?

The CHAIRMAN. Yes.

Mr. MAENCHE. Oh, my; there is no use talking to them about it. We pass lunch down around through our department at 10 o'clock every day, and I guess if we brought in four baskets they would keep right on eating. It is no use talking to them about it. We give them cake and pie and watermelon and all that kind of thing—in season, of course. Tobacco is also dished out to them in my department; 6 pounds of tobacco each week. The girl in charge of the female patients that work there goes up every day at half past 9 and 10 o'clock and brings over this basket full of food, and there isn't any of it left in the basket when she goes around.

The CHAIRMAN. Some man or other testified in regard to the purchase of machinery there. Did you ever have anything to do with buying washing machinery?

Mr. MAENCHE. I have nothing to do with the purchase of machines.

The CHAIRMAN. Was there any unnecessary machinery purchased since you have been there?

Mr. MAENCHE. Not in my estimation. I don't think there is, or had been.

Mr. HAY. Do you use all the machinery you have which is now there?

Mr. MAENCHE. No, sir; the machines we have just been installing are not in operation yet.

Mr. HAY. Why is that?

Mr. MAENCHE. Well, I don't know why. There has been a delay all the way through.

Mr. HAY. A delay in putting it up, you mean?

Mr. MAENCHE. There has been delay in erecting it, and there has been delay in different parts coming, in order to complete the job. I would at times confer with the chief engineer about my end, if it was convenient for him to do it. I did not think it necessary to go to the superintendent if we could get along among ourselves, and not trouble him. I thought it the best for all concerned.

Mr. HAY. If you have got along without using this machine, what is the use of buying it?

Mr. MAENCHE. There are patients that work in the wash room. That is where they claim these patients have been having these trucks run against them, as I understand. My object is to have wash wheels enough to give the crowd work, and not these patients, and take them out of them, and give it to the employees who are hired to do it.

Mr. HAY. And the machine that is not yet installed is to be put in there for that reason?

Mr. MAENCHE. Put in there for that reason and to give better results, better washing, and cleaner work. I asked for four more wash wheels than is in there; so there isn't any excess according to what I asked for. There is a person that made strong accusations against me here. He can't throw any bouquets at himself, because he and I have been over to the city together.

Mr. SMYSER. Who is that?

Mr. MAENCHE. McMurray. He can drink just as much as I can, and I believe he drinks more.

Mr. SMYSER. Then you are telling on each other. Is that it?

Mr. MAENCHE. No; not telling on each other. He did not tell about himself, did he, how much he drank? I did not hear his testimony, if he did, or part of it.

Mr. SMYSER. Say, Maenche, this is just the way you have done. You say you come over to town occasionally and drink a little too much?

Mr. MAENCHE. I acknowledge that.

Mr. SMYSER. But you endeavored to do your duty there?

Mr. MAENCHE. I was there, and I feel that I have done my duty conscientiously every day that I have stopped in that institution, not only in the line of this work, but also in the care and welfare of the patients that work under my roof in every instance, and if I fall short or have been found wanting, why, I have nothing to say at all. I will take the consequences.

The CHAIRMAN. You do not think it is true when they say you use rough and profane and vulgar language to many of the women there?

Mr. MAENCHE. I do not use any profane or vulgar language to any of the women.

The committee (at 3.30 o'clock p. m.) went into executive session, and subsequently adjourned until to-morrow, Wednesday, June 20, 1906, at 10 o'clock a. m.



HOUSE OF REPRESENTATIVES,  
*June 20, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Smyser (acting chairman), Hay, and Wallace.

Also Doctor White, Mr. Evans, Doctor Emmons, Mr. Clark, and others.

**TESTIMONY OF FATHER CHARLES M. BART.**

Father CHARLES M. BART, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name, please?

Father BART. Rev. Charles M. Bart.

The CHAIRMAN. Where do you live?

Father BART. At Anacostia.

The ACTING CHAIRMAN. What is your profession?

Father BART. I am a priest in the Catholic Church.

The ACTING CHAIRMAN. How long have you been in Washington?

Father BART. I have lived nearly all my life in Washington.

The ACTING CHAIRMAN. Do you know anything about St. Elizabeth's hospital?

Father BART. Yes, sir. I am connected with the institution as chaplain.

The ACTING CHAIRMAN. How long have you been such chaplain?

Father BART. A little over five years.

The ACTING CHAIRMAN. How frequently do you go to St. Elizabeth's in the discharge of your functions as chaplain?

Father BART. I and my assistant go there—it varies from one to two to maybe eight or ten times a week.

The ACTING CHAIRMAN. What trouble, if any, Reverend, do you encounter from the authorities there by way of seeing your people?

Father BART. None whatever.

The ACTING CHAIRMAN. Or any inmates?

Father BART. None whatever. On the contrary, whenever any Catholic patient there wishes the ministrations of the priest they immediately notify us, and, if it is an urgent case, they send a conveyance after us. I do not know of any case, nor does any case come to my mind, where they have neglected to send for us.

The ACTING CHAIRMAN. From your personal experience and observation, what do you say as to gentlemen of your theological belief being denied admission there?

Father BART. I know of no case.

The ACTING CHAIRMAN. It is the same as in the case of the Protestants? They are permitted to come and go?

Father BART. Yes; always.

The ACTING CHAIRMAN. And, as you say, they send for you?

Father BART. Yes; in an urgent case, or in case of necessity, they always send.

The ACTING CHAIRMAN. Do you know, and do you have anything to say, as to the management of the institution?

Father BART. As far as I have seen, my experience has always been that I have found everything in good condition. I have never found any mismanagement or anything out of good order and regularity.

The ACTING CHAIRMAN. And from what you could observe, how are the patients cared for and looked after?

Father BART. Very well, indeed. Those that I have had to attend to were shown every attention on the part of the attendants and nurses.

Mr. HAY. What are your duties, Father Bart?

Father BART. To administer the sacrament of the Catholic Church to the patients that are there, especially those who are dying; and also as chaplain of the institution I hold services there on a Sunday evening during two months—the months of January and February.

Mr. HAY. Only during those two months?

Father BART. Only during those two months.

Mr. HAY. Why are they confined to those two months?

Father BART. Because, as far as I understand, the rest of the year is divided up between four other ministers.

Mr. HAY. How often have you been called upon since you have been chaplain of the institution to conduct funeral services?

Father BART. In the institution, about five times.

Mr. HAY. In five years?

Father BART. Yes.

Mr. HAY. Do you know why the funeral services of the patients there are not always conducted by one of the chaplains of the institution?

Father BART. As far as I can understand the bodies are claimed by the relatives and are sent home to them.

Mr. HAY. I mean those who are interred there at the institution.

Father BART. At the cemetery there?

Mr. HAY. At the cemetery; yes.

Father BART. I don't know. I never heard the reason why.

Mr. HAY. Do you not think it ought to be done?

Father BART. Yes; but perhaps a great many that are buried there do not claim the ministrations of any minister. There are quite a number of that kind.

Mr. HAY. Of course they can not claim it when they are dead, I suppose.

Father BART. But generally, when they are interred, their relatives, I understand, make known what belief they belong to.

Mr. HAY. But it does not make any difference to the people themselves what belief they belong to, does it? Does it make any difference what belief they belong to as to whether or not they should have these funeral services?

Father BART. As far as they themselves are concerned it does not make any difference at all, but their relatives perhaps might want them to be buried in a certain belief.

Mr. HAY. Are the chaplains of the institution paid?

Father BART. Yes, sir; that is, I am.

The ACTING CHAIRMAN. From the institution, or otherwise?

Father BART. Yes, sir; through the institution.

Mr. HAY. One hundred dollars a year, I understand?

Father BART. One hundred dollars a year; yes.

## TESTIMONY OF A. J. PRICE.

A. J. PRICE, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. PRICE. Andrew J. Price.

The ACTING CHAIRMAN. Where do you live?

Mr. PRICE. I have been a resident of the District of Columbia for about going on three years.

The ACTING CHAIRMAN. Are you connected in any way with St. Elizabeth's?

Mr. PRICE. I have been employed there for going on three years, all but about two months, sir.

The ACTING CHAIRMAN. Where are you employed there?

Mr. PRICE. I am employed in the detached buildings. They are known as the detached buildings or department.

The ACTING CHAIRMAN. Are you an attendant or a nurse?

Mr. PRICE. I am an attendant.

The ACTING CHAIRMAN. Were you ever in the home building 4?

Mr. PRICE. I am in that ward now, sir.

The ACTING CHAIRMAN. What do you know about the treatment of patients there?

Mr. PRICE. Well, sir, as far as I know, the treatment of patients is good.

The ACTING CHAIRMAN. Did you ever abuse any yourself?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. Did you ever see any of the other attendants abuse them?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. Nurses or employees of any kind?

Mr. PRICE. None whatever.

The ACTING CHAIRMAN. How old are you?

Mr. PRICE. Twenty-three my last birthday.

The ACTING CHAIRMAN. You went in there very young, did you not?

Mr. PRICE. Yes, sir.

The ACTING CHAIRMAN. You live there?

Mr. PRICE. Yes, sir.

The ACTING CHAIRMAN. Would you have any hesitancy about telling us if you did know of these instances?

Mr. PRICE. No, sir; none whatever.

The ACTING CHAIRMAN. Did you know one McKnight?

Mr. PRICE. I do know a man by the name of McKnight; yes, sir.

The ACTING CHAIRMAN. Was he an inmate over there at any time?

Mr. PRICE. Yes, sir; he was.

The ACTING CHAIRMAN. Were you one of the attendants?

Mr. PRICE. Yes, sir; he was on my ward for a while.

The ACTING CHAIRMAN. Did anything ever happen between you and him?

Mr. PRICE. Nothing to my knowledge, sir.

The ACTING CHAIRMAN. Did you ever choke him?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. Did you ever threaten to?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. He says that you choked him in the home building 4. That is in the bull pen, is it?

Mr. PRICE. Well, I think that is what it is sometimes called by some of the folks.

The ACTING CHAIRMAN. Well, that is the name by which it has gotten into the record. Is there any truth in that?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. He said you threatened him a hundred times.

Mr. PRICE. I never threatened to abuse him in any way whatever.

The ACTING CHAIRMAN. Do you know of an incident in which he had a knife?

Mr. PRICE. I do; because he was searched on one occasion and it was found on him.

The ACTING CHAIRMAN. Who searched him?

Mr. PRICE. The supervisor, Mr. Carter.

The ACTING CHAIRMAN. Do you mean to say to the committee that you never had any trouble with McKnight at all?

Mr. PRICE. No, sir; no trouble whatever.

The ACTING CHAIRMAN. Did you ever see him wrung out by the toweling process?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. Do you know what that is?

Mr. PRICE. I don't know it; I couldn't swear what it is, but I have heard what it is. It is a kind of process that you apply a wet towel to their necks.

The ACTING CHAIRMAN. Did you ever see it done?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. Did you ever do it yourself?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. Or did such a thing go on in your ward when McKnight was there and you not know it?

Mr. PRICE. There was not such a thing going on; it never was carried on in there, not since I have been in that ward, sir.

The ACTING CHAIRMAN. Did you ever see that done in any other ward?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. How is the food over there?

Mr. PRICE. Well, the food is very good; sometimes it is inferior, but it is not properly cooked. It would be much better if it was properly cooked and served correctly, yet I suppose it is fairly good as it is, as good as you might expect.

The ACTING CHAIRMAN. Did you ever jump onto McKnight's back?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. And throw him down?

Mr. PRICE. I never did, sir.

The ACTING CHAIRMAN. Did you ever have any trouble with him at all?

Mr. PRICE. No, sir; I never had no trouble whatever with him.

The ACTING CHAIRMAN. Do you know whether he made complaint to Doctor White about you?

Mr. PRICE. Well, I am unable to say whether he made complaint to Doctor White or not.

The ACTING CHAIRMAN. Did he make complaints to your supervisor?

Mr. PRICE. He did.

The ACTING CHAIRMAN. What was the complaint that you got from the supervisor that he made against you?

Mr. PRICE. Well, sir, the complaint he made against me to the supervisor—he said that I did choke him and wrung him out, but it undoubtedly was not so. He also made a complaint to the attending physician of that department, and it was investigated.

The ACTING CHAIRMAN. It was investigated?

Mr. PRICE. Yes, sir.

The ACTING CHAIRMAN. Were you relieved of the charge?

Mr. PRICE. So far as I know. I did not hear anything more of it.

Mr. HAY. You say you heard of this toweling process. Where did you hear it from?

Mr. PRICE. Well, I heard it around in the institution, but no more than a joke that I have heard passed among the attendants. I have heard them make the remark of applying it on one another.

Mr. HAY. Then there was such a thing spoken of there?

Mr. PRICE. Yes, sir.

Mr. HAY. Among the attendants?

Mr. PRICE. I am not saying that it was spoken of to the attendants or anything of that kind at all.

Mr. HAY. It was just common talk?

Mr. PRICE. Yes.

Mr. HAY. About the toweling process?

Mr. PRICE. Yes.

The ACTING CHAIRMAN. Do you mean that the attendants joked each other about toweling?

Mr. PRICE. Oh, no, sir; I do not mean to say that they did it at all; but it was just a remark that they would try to apply it on each other on occasions.

The ACTING CHAIRMAN. What, towel each other, do you mean?

Mr. PRICE. No; I do not mean to say that they did it; but they just passed the joke on each other.

The ACTING CHAIRMAN. What was the joke?

Mr. PRICE. You might say they just told each other of it.

The ACTING CHAIRMAN. That is, some of them would say to you, "Well, you have been toweling somebody?"

Mr. PRICE. No; I don't mean to say that, either.

The ACTING CHAIRMAN. What was it?

Mr. PRICE. I mean to say that if they get to talking and they don't exactly agree, they say they would apply a towel to each other—just the attendants.

The ACTING CHAIRMAN. As a sort of a gentle coercive process to make them agree. Is that it?

Mr. PRICE. I don't know as it is to make them agree, but it is just commonly used.

The ACTING CHAIRMAN. Is that all you know about the toweling process, that occurs in that way, among the attendants?

Mr. PRICE. It is, sir.

The ACTING CHAIRMAN. And you characterize that in a joking way?

Mr. PRICE. I do, undoubtedly.

The ACTING CHAIRMAN. That in your talks among the attendants over there one would say to the other attendant, "Well, I will towel you," or something like that. Is that it?

Mr. PRICE. Exactly, sir.

The ACTING CHAIRMAN. And that talk, as you heard it, had no origin from the patients themselves, but was among the attendants. Is that it?

Mr. PRICE. None whatever, sir. I have not heard one say he would apply it on any patient. I never saw it done.

The ACTING CHAIRMAN. How long did you say you have been there?

Mr. PRICE. Going on three years. The 24th of August I will be there three years.

The ACTING CHAIRMAN. Did you ever restrain people with straps, or camisoles, or straitjackets?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. Did you ever see it done?

Mr. PRICE. No, sir; not in the ward that I am on I never saw it done. I had no occasion to do it.

The ACTING CHAIRMAN. Did you ever see it done in any other wards?

Mr. PRICE. No, sir.

The ACTING CHAIRMAN. So that you do not know any more about that from actual experience and observation than the rest of us do?

Mr. PRICE. No, sir; nothing whatever.

The ACTING CHAIRMAN. At your age you would be curious to see that performance, would you not?

Mr. PRICE. Well, I would not like to see it.

The ACTING CHAIRMAN. I mean if it was going on you would have curiosity enough to try and see it, if it was going on.

Mr. PRICE. If there was any way a fellow could see it, I suppose so. It is natural, I think.

The ACTING CHAIRMAN. I suppose so. Where are you from?

Mr. PRICE. Maryland.

#### TESTIMONY OF S. B. MUDD.

S. B. MUDD, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. MUDD. S. B. Mudd.

The ACTING CHAIRMAN. Are you connected with St. Elizabeth's Hospital?

Mr. MUDD. Yes, sir.

The ACTING CHAIRMAN. How long have you been there?

Mr. MUDD. About sixteen years.

The ACTING CHAIRMAN. What are your duties?

Mr. MUDD. I am an attendant in the detached buildings.

The ACTING CHAIRMAN. What is that?

Mr. MUDD. I am an attendant in the detached buildings. It is called the detached buildings.

The ACTING CHAIRMAN. Did you know one McKnight?

Mr. MUDD. Yes, sir.

The ACTING CHAIRMAN. Did you ever towel him?

Mr. MUDD. No, sir.

The ACTING CHAIRMAN. Did you ever see him toweled?

Mr. MUDD. No, sir.

The ACTING CHAIRMAN. Maybe you do not know what toweling is—or do you?

Mr. MUDD. Well, I don't. I never seen anything of that kind used. I never have since I have been in the institution.

The ACTING CHAIRMAN. What is that?

Mr. MUDD. I have never seen this toweling used—that is, the way it is supposed to be used.

The ACTING CHAIRMAN. You never saw a towel dampened and put around a patient's neck and twisted?

Mr. MUDD. No, sir; I have not. I have never seen an instance of it since I have been in the institution.

The ACTING CHAIRMAN. What is this talk we have been going through for months here about toweling over there? How does it have its origin? Do you know?

Mr. MUDD. I do not, sir.

The ACTING CHAIRMAN. You never saw it?

Mr. MUDD. Never, sir. I never saw an instance of it.

The ACTING CHAIRMAN. You knew McKnight?

Mr. MUDD. I did.

The ACTING CHAIRMAN. You never toweled him?

Mr. MUDD. I did not.

The ACTING CHAIRMAN. You never saw him toweled?

Mr. MUDD. I never saw him toweled; no, sir.

The ACTING CHAIRMAN. By this young man Price?

Mr. MUDD. No, sir; I did not.

The ACTING CHAIRMAN. Were you an attendant there when he was there?

Mr. MUDD. I was, sir.

The ACTING CHAIRMAN. In building 4?

Mr. MUDD. On the same ward with him.

The ACTING CHAIRMAN. Did you ever see him jumped onto?

Mr. MUDD. No, sir.

The ACTING CHAIRMAN. Did you ever see anybody jump on his back?

Mr. MUDD. No, sir; I did not.

The ACTING CHAIRMAN. Nothing of the kind?

Mr. MUDD. No, sir.

The ACTING CHAIRMAN. What was the treatment of patients over there?

Mr. MUDD. They are treated good, as far as I know. We aim to treat them right, and they are treated first class.

The ACTING CHAIRMAN. There is no abuse of any kind?

Mr. MUDD. No, sir; not that I know of.

The ACTING CHAIRMAN. You would tell us, would you not?

Mr. MUDD. Why, most undoubtedly.

The ACTING CHAIRMAN. You never saw anything between McKnight and Mr. Price?

Mr. MUDD. No, sir.

The ACTING CHAIRMAN. Did you ever see the strait-jacket?

Mr. MUDD. Not in recent years. Several years ago they were used. I have seen eight or ten years ago, but in the last four or five years I have seen none.

The ACTING CHAIRMAN. Are there any means of restraint of patients used in your ward?

Mr. MUDD. Well, sometimes we put them in a room and close the door if they get a little obstreperous—too much so.

The ACTING CHAIRMAN. But you do not confine them by tying them?

Mr. MUDD. No, sir.

The ACTING CHAIRMAN. Nothing of that kind?

Mr. MUDD. Nothing of that kind.

The ACTING CHAIRMAN. How is the food over there?

Mr. MUDD. Well, the food is—some of it is good and some is inferior.

The ACTING CHAIRMAN. Generally, how is it?

Mr. MUDD. Well, it is ordinary.

The ACTING CHAIRMAN. What is the trouble with the food? Is it in the food itself—its quality—or in the cooking?

Mr. MUDD. Well, I think it is as much in the cooking as in the food. I think it is very inferior cooking at times. The meat—the steak, for instance, or what is called steak—is dry and tough. It is a difficult matter to chew it.

Mr. HAY. Mr. Mudd, what building are you in now?

Mr. MUDD. Home 4.

Mr. HAY. You have been there for some time?

Mr. MUDD. I have been there about four years; yes, sir.

Mr. HAY. You are on duty fourteen hours one day and twelve hours one day?

Mr. MUDD. Fourteen hours, yes, sir, we are on duty, and twelve another day.

Mr. HAY. What have you to say about that?

Mr. MUDD. Well, we are on duty, you may say, about forty-three hours—that is, we are on duty at night. We have our keys, and we are locked in the rooms, and the night watchman comes around to see that we are in there; and in case of an emergency we are called on and we have got to respond. For instance, if a man dies, we have got to go out and help dress him, fix him up; or if there is some one sick—in fact, if there is anything going on in the ward, any disturbance, we have got to get up, of course, in the night and see about it.

Mr. HAY. Do you think the hours are too long?

Mr. MUDD. Most undoubtedly they are, sir—that is, they are too long for the little pay that is attached to it.

Mr. HAY. What do you get?

Mr. MUDD. Well, I get \$35.

Mr. HAY. You have been there fifteen years and you get \$35 and your board and everything found, I suppose.

Mr. MUDD. Not everything. We get board.

Mr. HAY. Of course you have to buy clothes, but you get everything else, do you not?

Mr. MUDD. Well, we get some board, of course. [Laughter.]



Mr. HAY. You get some board. Mr. Mudd, how many patients are on your ward?

Mr. MUDD. Fifty-seven.

Mr. HAY. How many of you are in charge of them?

Mr. MUDD. There are two of us at the most, and sometimes there is one.

Mr. HAY. Two at the most, and sometimes one?

Mr. MUDD. Sometimes one. If there is one off for a day there is only one attendant there, except they send an attendant from a relief for the patients to be taken out walking, or to relieve at meals a short time, but then there is practically one on duty while the other attendant is off.

Mr. HAY. Do you think that is a sufficient number of attendants to take care of the patients?

Mr. MUDD. I do not, sir. I think a ward with fifty-seven patients never should have one attendant alone.

Mr. HAY. What is the character of these patients that you have?

Mr. MUDD. Well, on the ward that I have charge of most of them are good patients, mild; but then we have seven or eight of them that are violent at times. We have one that is a raving maniac. He gets up in the night and raves, and wakes the whole ward up. He is a man that raves in the day sometimes for an hour at a time.

Mr. HAY. And he requires your attention?

Mr. MUDD. We have to do the best we can with him, but it looks like a man like that should not be on a ward that most all the patients are quiet; he disturbs the whole ward.

Mr. HAY. You say you never heard of this toweling process?

Mr. MUDD. I have heard it mentioned, maybe, a few times.

Mr. HAY. When was the first time you ever heard it mentioned?

Mr. MUDD. Well, I never—well, I have heard some of them make that remark, but I never paid any attention to it. I never saw an instance of it.

Mr. HAY. You say you have heard some of them make the remark. What do you mean by "some of them?"

Mr. MUDD. I have heard some of the attendants. Very seldom I have heard it. But I never saw an instance of it.

Mr. HAY. I understand that you never saw it, but I was just asking if you had heard about it. You say you have heard about it?

Mr. MUDD. Oh, I have heard that remark made maybe a few times.

Mr. HAY. What remark did you hear?

Mr. MUDD. Well, I have heard the remark made about "wringing you out." Of course a lot of young attendants get together and they run on a lot of foolishness, and I have heard it in that way; but I never paid any attention to it.

Mr. HAY. You say you never have seen strait-jackets for four or five years?

Mr. MUDD. No, sir.

Mr. HAY. What do you mean by a strait-jacket?

Mr. MUDD. Well, a strait-jacket has long sleeves to it, and it is corded up behind with a cord.

Mr. HAY. What do you call it out there? You do not class it a strait-jacket, do you? They call it a camisole?

Mr. MUDD. No; there is a canvas suit outside of that that is used

sometimes; but a strait-jacket is simply a jacket. This canvas suit is a whole suit.

Mr. HAY. Then, in your ward, there has been no use of this strait-jacket for four or five years?

Mr. MUDD. No, sir; not since I have been there, not a case, and not a canvas suit used. We have on that ward a good class of patients with a few exceptions. Of course the convalescent patients when they are sick they are sent right to the hospital.

Mr. WALLACE. What exercise do you give the soldiers who are confined in that inclosure there that is alluded to as the bull pen?

Mr. MUDD. Well, about one-half of them on the ward I am on have parole, and they are out from breakfast until dinner.

Mr. WALLACE. I am speaking of those who are kept inside.

Mr. MUDD. We take them out every day—sometimes twice a day—whenever we can do it we take them out twice a day and take a walk for about half a mile down to the river and around. We walk them around for an hour or two hours.

Mr. WALLACE. Is there a certain number of soldiers or ex-soldiers out there who are confined in the grounds and who are never taken out?

Mr. MUDD. There are a lot of them there that have parole in the grounds.

Mr. WALLACE. I mean are there some who are never taken out at all?

Mr. HAY. Do you mean outside of the buildings?

Mr. WALLACE. No; I mean outside of the inclosure.

Mr. MUDD. Yes, sir; there are a good many.

Mr. WALLACE. A good many who never get outside of the inclosure?

Mr. MUDD. That do not get out of the inclosure.

Mr. WALLACE. What do they do for exercise? What do you do for them?

Mr. MUDD. They walk around. There is a good space there. I suppose there are 10 or 11 or 12 acres besides what the buildings occupy—at least 10 acres.

Mr. WALLACE. There are some who never get outside of the building?

Mr. MUDD. Well, there are a few. They go from the building to the dining room. There is some few that are not fit to walk, and they don't want to go walking, and, in fact, they couldn't walk and keep up. At the same time, they are not fit to have a parole. There are a very few, though, of that class.

Mr. WALLACE. About how many are simply allowed the privilege of that inclosure, and who do not go out?

Mr. MUDD. It would be pretty hard for me to tell.

Mr. WALLACE. Approximate it.

Mr. MUDD. About 27 in the ward I am on—very near half. I suppose there are 150 or 200. That would be a wide guess. I couldn't tell.

Mr. WALLACE. You mean that many that stay inside?

Mr. MUDD. That stay inside of the inclosure.

Mr. HAY. Do you know a man there named Michael Powers?

Mr. MUDD. No, sir.

## TESTIMONY OF W. G. LEAPLEY.

W. G. LEAPLEY, having been duly sworn, was examined and testified as follows:

MR. HAY. Mr. Leapley, you are an attendant at St. Elizabeth's?

MR. LEAPLEY. No, sir; I am a nurse.

MR. HAY. How long have you been there?

MR. LEAPLEY. A little over three years.

MR. HAY. Are you a graduate from the training school there?

MR. LEAPLEY. Yes, sir.

MR. HAY. Did you know a man there named McKnight?

MR. LEAPLEY. Yes, sir.

MR. HAY. You say you did know a man whose name was McKnight?

MR. LEAPLEY. Yes, sir.

MR. HAY. Was he on your ward?

MR. LEAPLEY. Why, I am on a hospital ward, and he was on the convalescent ward, on Mr. Mudd's ward. I work on the hospital ward. He used to take his meals in my ward, and remained there in the daytime, and at nights he would be sent back to the other ward.

MR. HAY. What ward are you on?

MR. LEAPLEY. I am on Allison B second, detached buildings.

MR. HAY. He testifies that you struck a man who was sick and blackened his eye. What have you to say about that?

MR. LEAPLEY. I don't know anything about it. I never did it.

MR. HAY. He said he would raise up and you would hit him. Do you know anything about that?

MR. LEAPLEY. No, sir.

MR. HAY. Was any complaint made by him to the superintendent, or to the physician in charge, that you know of?

MR. LEAPLEY. Why, I think he did make a complaint to Doctor Hummer at one time, something about some trouble we had on the ward.

MR. HAY. How did that wind up? What was the end of that?

MR. LEAPLEY. Doctor Hummer did not believe what he told him.

MR. HAY. You were exonerated, were you?

MR. LEAPLEY. I was.

MR. HAY. Mr. Leapley, do you know anything about the toweling process?

MR. LEAPLEY. No, sir.

MR. HAY. Did you ever hear anything about it?

MR. LEAPLEY. Well, I guess I have heard it, but I have never seen any of it.

MR. HAY. Where did you hear it?

MR. LEAPLEY. I heard it around the hospital. Then I read it in the papers, too, since this investigation.

MR. HAY. Did you hear of it before you saw it in the papers?

MR. LEAPLEY. Well, I rather reckon I did.

MR. HAY. What have you to say about the food out there?

MR. LEAPLEY. The food at times is fairly good, and then again it is not so good. If it was cooked better and handled better in the

kitchen it would be better. The beef-steak, as Mr. Mudd says, is very tough, and so it is, and the corned beef.

Mr. HAY. Is that the only complaint you have, that the beefsteak is tough?

Mr. LEAPLEY. Well, the food in general could be cooked better and handled better.

Mr. HAY. How many patients are there on your ward?

Mr. LEAPLEY. I have 12 patients on my ward—that is, that remain there—and then I have about, on an average, 8 extra ones, which makes an average of about 20 men that remain on the ward every day from 6.30 or 7 o'clock until about 7, when the other 8 of them are returned to their own wards.

Mr. HAY. How many have you there to aid you in this ward in looking after these patients?

Mr. LEAPLEY. How many patients have I to help with the work on the ward?

Mr. HAY. No; how many attendants have you?

Mr. LEAPLEY. Nobody but myself.

Mr. HAY. Do you think you are able to look after all those patients and give them such attention as they ought to have?

Mr. LEAPLEY. I have been on there for very near a year, and I have done it, and Doctor Hummer has never found any complaint.

Mr. HAY. What have you to say about the length of time you have to be on duty?

Mr. LEAPLEY. Well, I think that they are rather long hours. We have to work from 6 in the morning until 8 in the evening, and then from 6 in the morning on the next day until between 5 and 6, or after tea, as they call it. We get off about 5 or a quarter after 5. I think they are very long hours.

#### TESTIMONY OF G. B. THORNE.

G. B. THORNE, having been duly sworn, was examined and testified as follows:

Mr. HAY. Mr. Thorne, you are connected with St. Elizabeth's?

Mr. THORNE. Yes, sir.

Mr. HAY. What position have you there?

Mr. THORNE. I am a nurse.

Mr. HAY. What ward are you on?

Mr. THORNE. At the present time I am on the Retreat First, at night. I am on at night.

Mr. HAY. How long have you been there?

Mr. THORNE. Since the 26th of last month.

Mr. HAY. Where were you before you went on that ward?

Mr. THORNE. I was on B 4.

Mr. HAY. Did you know a man there by the name of Shuster?

Mr. THORNE. Yes, sir; I did know him.

Mr. HAY. Mr. Shuster complained that you treated him badly. What have you to say about that?

Mr. THORNE. Why, I deny it.

Mr. HAY. He says you grabbed him by the leg and pulled him out of bed. What have you to say about that?

Mr. THORNE. I do not remember of any such occurrence.

Mr. HAY. Have any complaints been made against you that you know of by any of these people who are under your care?

Mr. THORNE. Why, occasionally some of them might complain to the supervisors, if something didn't go to suit them.

Mr. HAY. What has been the end of it all?

Mr. THORNE. I was exonerated.

Mr. HAY. You have been exonerated?

Mr. THORNE. Yes, sir.

Mr. HAY. Do you know a patient over there whose name is Frank Davey?

Mr. THORNE. Yes, sir.

Mr. HAY. Has he ever complained of you?

Mr. THORNE. I do not know whether he complained to the officials or not, but he and I had a little difficulty one morning.

Mr. HAY. What was the character of the difficulty?

Mr. THORNE. It was simply that we had words. We didn't come together or anything like that.

Mr. HAY. Have you ever come together with any of them?

Mr. THORNE. No, sir—well, very seldom. There is times that it would be necessary to take hold of them.

Mr. HAY. Give us an instance of what you think would authorize you to take hold of them, as you call it.

Mr. THORNE. If a man is trying to injure himself, or breaking windows, or injuring another patient.

Mr. HAY. Or trying to injure you?

Mr. THORNE. Yes, sir.

The CHAIRMAN. What would you do? How would you take hold of him?

Mr. THORNE. We would have to take him and hold him, if we could.

Mr. HAY. Mr. Thorne, what do you think of the food there?

Mr. THORNE. Well, the last fourteen months, in that building that I have been in, it has been fairly good.

Mr. HAY. You are under Doctor Logie?

Mr. THORNE. No, sir; I am under Doctor Stack.

Mr. HAY. What have you to say about the hours of work?

Mr. THORNE. They are very long.

Mr. HAY. Do you think the hours of work are so long as to impair the usefulness of you and those who have the same hours that you have?

Mr. THORNE. I think it would have a tendency to.

Mr. HAY. How many are under your control in this ward there?

Mr. THORNE. At present?

Mr. HAY. Yes, sir.

Mr. THORNE. There are 38.

Mr. HAY. How many attendants?

Mr. THORNE. Two.

Mr. HAY. What have you to say about that? Have you sufficient help?

Mr. THORNE. Well, at nights—this is at night, you know—we get along very well.

Mr. HAY. You are on duty, then, only at night?

Mr. THORNE. Yes, sir.

Mr. HAY. How many are on duty in that ward during the day?

Mr. THORNE. Four men and a nurse, I think.

Mr. HAY. Do you think that is enough?

Mr. THORNE. I guess they give pretty good service.

Mr. HAY. This ward that you speak of is a hospital ward, is it not?

Mr. THORNE. Yes, sir.

Mr. WALLACE. Have you known of any windows being broken out there, in your ward or elsewhere, by the patients?

Mr. THORNE. No; I do not know of any.

Mr. WALLACE. You do not know of any patient having been sent to Howard Hall as a punishment for breaking windows?

Mr. THORNE. No; I do not.

Mr. HAY. Did you have a brother over there?

Mr. THORNE. Yes, sir.

Mr. HAY. Was he discharged?

Mr. THORNE. No, sir.

#### TESTIMONY OF P. J. MARTIN.

P. J. MARTIN, having been duly sworn, was examined and testified as follows:

Mr. HAY. Mr. Martin, you are an attendant, are you, over there?

Mr. MARTIN. I am a nurse over at St. Elizabeth's.

Mr. HAY. Did you know a patient there named Shuster?

Mr. MARTIN. Yes, sir; he was there. He is discharged now.

Mr. HAY. Did you not testify here before?

Mr. MARTIN. Yes, sir; I did. I was called upon in that Shuster case, Mr. Chairman.

Mr. HAY. That is what I thought. You can stand aside.

#### TESTIMONY OF H. T. LANG.

H. T. LANG, having been duly sworn, was examined and testified as follows:

Mr. HAY. Mr. Lang, you are an attendant at St. Elizabeth's?

Mr. LANG. Yes, sir.

Mr. HAY. How long have you been there?

Mr. LANG. I have been there two years.

Mr. HAY. Where are you employed in the hospital?

Mr. LANG. I am in the R building.

Mr. HAY. Under whom?

Mr. LANG. Under Doctor Logie.

Mr. HAY. What have you to say about the food there?

Mr. LANG. Well, the food we get is very good.

Mr. HAY. Has it always been good?

Mr. LANG. Yes, sir; it has been very good where I have been.

Mr. HAY. How many patients are there under your control?

Mr. LANG. Thirty-six.

Mr. HAY. And how many attendants?

Mr. LANG. Four.

Mr. HAY. Your ward is a hospital ward?

Mr. LANG. Yes, sir.

Mr. HAY. Do you think that is a sufficient number of attendants?

Mr. LANG. Yes; we get along with them very well.

Mr. HAY. Did you know a patient there by the name of Doctor Carraher?

Mr. LANG. Yes, sir.

Mr. HAY. It has been testified here that you abused him in some way—that you pushed him down. What have you to say about that?

Mr. LANG. I never did.

Mr. WALLACE. Do you have a good many patients in bed, tied down in any way?

Mr. LANG. How is that?

Mr. WALLACE. Do you have a good many patients tied in bed?

Mr. LANG. No, sir; we do not have any tied in bed.

Mr. WALLACE. And under restraint, or anything of that sort?

Mr. LANG. No, sir.

Mr. WALLACE. Well, do you know whether that is done over there?

Mr. LANG. I never seen it done.

Mr. W. G. LEAPLEY. Mr. Chairman, I would like to add to my testimony that we have a lady nurse on my ward with me.

Mr. HAY. That will be noted.

#### TESTIMONY OF FRANK BLINN.

FRANK BLINN, having been duly sworn, was examined, and testified as follows:

Mr. HAY. Mr. Blinn, you are employed out at St. Elizabeth's?

Mr. BLINN. Yes, sir.

Mr. HAY. What part of the institution are you in?

Mr. BLINN. I am in Doctor Logie's department.

Mr. HAY. What are you employed as?

Mr. BLINN. I am on night work now—night watchman.

Mr. HAY. How long have you been there?

Mr. BLINN. About fourteen years, or a little over.

Mr. HAY. Mr. Blinn, it has been testified by Mrs. Carraher that she saw you pick up an old patient and throw him down on the floor and jump on him.

Mr. BLINN. She exaggerated the truth.

Mr. HAY. It is not true, you say. What have you to say about the food?

Mr. BLINN. It is very good.

Mr. HAY. Did you ever hear anything out there about the toweling process?

Mr. BLINN. Yes, sir.

Mr. HAY. Sir?

Mr. BLINN. I have.

Mr. HAY. Have you ever seen it put in practice?

Mr. BLINN. I never did.

Mr. HAY. Who did you hear it from?

Mr. BLINN. Well, some of the attendants around there.

Mr. HAY. From the attendants?

Mr. BLINN. Yes.

Mr. HAY. You mean general talk about the toweling process?

Mr. BLINN. Well, it might happen two or three times a year probably.

Mr. HAY. What did they say about it?

Mr. BLINN. Well, that is all—"the toweling process."

Mr. HAY. What was the occasion of their saying anything?

Mr. BLINN. I don't know.

Mr. HAY. If there had not been any toweling process put in practice there why should anything have been said about it?

Mr. BLINN. I don't know; they might have did it. I don't know anything about it.

Mr. HAY. What have you to say about the food?

Mr. BLINN. I say it is very good.

Mr. HAY. What have you to say about the hours?

Mr. BLINN. Well, the hours are kind of long and tiresome, especially if you work in a hospital ward. It is kind of tiresome, but they make out.

Mr. HAY. How many attendants are there on your ward?

Mr. BLINN. I am on night duty; there is two. Of course I have to make the rounds of the building and go through.

Mr. HAY. Do you think they have sufficient attendants down there to take care of the patients?

Mr. BLINN. Well, we make out pretty well.

Mr. HAY. I did not ask you whether you made out. I asked you whether they have sufficient attendants, in your opinion?

Mr. BLINN. Well, I can not find any place where they would really require some more.

Mr. HAY. Sir?

Mr. BLINN. I can not find any place where they really absolutely require some more. There are 8 of us to look out for about 370 patients.

Mr. HAY. Eight of you look after 370 patients? You mean there are 8 of you on duty at night?

Mr. BLINN. Yes.

Mr. HAY. And how many on duty to look after those patients during the day?

Mr. BLINN. I do not know the exact number. They used to be, when I was on day work, about 36 or 37. I think there have been a few more added to it. There must be about 40, I think, now.

Mr. WALLACE. Do you know of any patients being roughly handled there by attendants?

Mr. BLINN. No.

Mr. WALLACE. Can you count quite a number of them that have been discharged from there?

Mr. BLINN. Oh, you mean that way. Yes; I have heard that the attendants abusing patients have been discharged for it. I have heard it, although it never happened on my ward. It happened on some of the wards, and I have heard of it.

Mr. WALLACE. Did Supervisor Carter instruct you to cut off the butter supply there at any time?

Mr. BLINN. No, sir.

Mr. WALLACE. Not butter, but sugar?

Mr. BLINN. Yes; he cut off the sugar.

Mr. WALLACE. Did you have it served with oatmeal?

Mr. BLINN. Yes.

Mr. WALLACE. What is the reason for cutting it out?

Mr. BLINN. Well, I don't know. To improve the taste, I guess.

Mr. WALLACE. To what?



Mr. BLINN. To improve the taste. I don't know; he just cut it off.

Mr. WALLACE. Do you know of a patient out there getting his ribs fractured or broken?

Mr. BLINN. Well, you don't name the patient. No; I don't know anything about it.

Mr. HAY. You do not know of any patient in your ward who has had that happen to him?

Mr. BLINN. I do not remember any. There is so many that come there. That is a hospital department. No; I don't know of any. I can not recall any cases.

Mr. WALLACE. Do you know of any patients fighting out there?

Mr. BLINN. Yes. Well, I have been on duty very near three months, and they have had one scrap—one night a couple of patients came together.

#### TESTIMONY OF DR. CHARLES M. EMMONS.

Dr. CHARLES M. EMMONS, having been duly sworn, was examined and testified as follows:

Mr. HAY. Doctor Emmons, you are a practicing physician?

Doctor EMMONS. I am, and have been since 1893. I graduated at the Georgetown University.

Mr. HAY. What experience have you had with any institutions? Just state the institutions.

Doctor EMMONS. For about two years I was on the resident staff of the Washington Asylum in this city. Then, from there, I went to the Emergency Hospital and was on the resident staff there for something over a year. Then I was, for about four years, at Doctor Hammond's private asylum, a sanitarium for the treatment of brain and nervous diseases, and I was connected with the Eastern Dispensary as one of the eye and ear doctors, and physician to the poor here for about three years in this city.

Mr. HAY. You are one of those connected with the Medico-Legal Society?

Doctor EMMONS. I am the secretary of it; yes, sir.

Mr. HAY. Which instituted or began the investigation which has resulted in this investigation?

Doctor EMMONS. I was requested by Doctor Reyburn to make a report of the condition of the comparative treatment and care of the insane in this city and in other cities, which I did.

Mr. HAY. How many societies are there here?

Doctor EMMONS. We have quite a number of societies. We have a medical society here which is composed of men in regular practice. I think they number something over five hundred members. That is the large society. Then we have a number of smaller societies. The large society is known as the Medical Association. We have a number of smaller societies which do not consider ethical subjects, but which consider scientific subjects, such as reading of papers. Among those are the Medical Society of the District of Columbia, and the Medical and Surgical Society of the District of Columbia. I might state here that I am a member of both the Medical Association and the Medical Society.

I would like also at this time to make a statement relative to the testimony of Doctor Shute, who is also a member of the Medical Society, in which he stated that Doctor White was elected to membership unanimously by, I believe, invitation. In his testimony I take it there was some reflection made at the time of this election on the Medico-Legal Society, or something of the kind. I have talked with the secretary in relation to the matter, and I find that at the time of this election of Doctor White there was no mention made of the controversy, and that at the time of the presentation of his name nothing was said in reference to this controversy or to the Medico-Legal Society, or any parties connected with the criticism of the institution. I am only sorry that I was not notified and able to be present, to cast my vote for Doctor White. I would not have interfered with its being unanimous. The Medical Society is a society which considers scientific papers, and is not a society that considers ethics at all.

I want to make one or two statements relative to some of the figures as given by the table prepared by Doctor White.

We have prepared a table of the per capita cost, the per cent of recoveries and deaths, etc. I will state, in all fairness, that the question of recoveries and deaths is one that is very uncertain; but as to the question of per capita cost I do not believe that it is open to the same objection.

Mr. HAY. Is this table that you speak of filed here?

Doctor EMMONS. Yes. I think it is contained in volume 17 of the record. (See page 915.)

I have here a letter from Catonsville, Md., under date of November 16, 1905, which states that the per capita cost at the Maryland Hospital for the Insane is \$192, including all necessary maintenance and general repairs, which is somewhat contradictory of the statement as made in the table in volume 17.

(The above-mentioned letter is filed herewith, marked "Exhibit Emmons No. 1.") (See page 1764.)

I have another letter from the Oklahoma Hospital, dated November 20, 1905, which states that the Territory pays the hospital \$200 per year for each patient. It contains also a statement relative to the death rate.

(The above-mentioned letter is filed herewith, marked "Exhibit Emmons No. 2.") (See page 1765.)

I have also a letter here from the Toledo State Hospital, of Ohio, which gives the per capita cost as \$124.60.

(The above-mentioned letter is filed herewith, marked "Exhibit Emmons No. 3.") (See page 1765.)

I have also here a report of the superintendent of the State lunatic asylum, of Austin, Tex., for the years ending August 31, 1903, and August 31, 1904, which I will put in. I believe, if I remember correctly, there was a criticism made as to the year from which this per capita cost was taken. It can be found from this report, and it will agree with the statement as given by the Medico-Legal Society.

(The above-mentioned report is filed herewith, marked "Exhibit Emmons No. 4.") (See page 1766.)

I have here a letter from the Wyoming State Hospital for the

Insane, which shows the per capita cost to be below 45.8 cents a day, which will show a yearly per capita cost of \$186.15.

(The above-mentioned letter is filed herewith, marked "Exhibit Emmons No. 5.") (See page 1767.)

I have here the eighth biennial report of the Southern Indiana Hospital for the Insane, which will show that the per capita cost is \$165, as per our table.

(The above-mentioned report is filed herewith, marked "Exhibit Emmons No. 6.") (See page 1767.)

I have also a letter from the Southern California State Hospital, from the superintendent, which shows that the cost of maintenance per capita is 47 cents per day, which I think will come out just a few cents larger than we made it. However, that is a matter of calculation.

(The above-mentioned letter is filed herewith, marked "Exhibit Emmons No. 7.") (See page 1767.)

I have also a letter from the New Hampshire State Hospital. The criticism was made that repairs and improvements were not included. This letter from the superintendent of that hospital states that the per capita cost is \$4 per week, including salaries of officers, repairs, and improvements.

(The above-mentioned letter is filed herewith, marked "Exhibit Emmons No. 8.") (See page 1768.)

I have here a letter from the superintendent of the Dannemora State Hospital, of New York, in which he states that the per capita cost is \$3.90, figured on the same basis as in former years. He, however, states, "Heretofore officers' salaries have been paid from special appropriation and not included in the general maintenance. This has been changed, however, and figured on the new basis, the per capita cost would be \$4.41," and he also makes this statement: "This is a small institution, with about 260 patients, and the per capita cost is necessarily rather high."

(The above-mentioned letter is filed herewith, marked "Exhibit Emmons No. 9.") (See page 1768.)

The same can be said in relation to the Wisconsin State Hospital for the Insane. I have here the report of that institution, ending June 30, 1904, which shows that the cost was \$108,978, and there were 425 patients, so that by calculation it brought out a per capita cost of \$205.

(The above-mentioned report is filed herewith and marked "Exhibit Emmons No. 10.") (See page 1769.)

I have here a letter from the Utica State Hospital, Utica, N. Y., dated November 8, 1905, which shows that during the fiscal year which ended September 30, 1905, the per capita cost was \$200.74, which does not agree with the table, as given to you.

(The above-mentioned letter is filed herewith, marked "Exhibit Emmons No. 11.") (See page 1769.)

I have here also the report of the Illinois Asylum for Insane Criminals for the year 1904, which shows, on page 7, a per capita cost of \$202, instead of \$221.78, as suggested by Doctor White.

(The above-mentioned report is filed herewith, marked "Exhibit Emmons No. 12.") (See page 1770.)

I will also put in the report of the State Lunatic Asylum of Arkansas, as to the per capita cost, which is shown here to be \$8.33. They did ask, in giving the appropriation, for \$10, but the actual per capita cost of that institution is \$8.33 a month.

(The above-mentioned report is filed herewith, marked "Exhibit Emmons No. 13.") (See page 1770.)

The report of the Athens State Hospital shows a per capita cost of \$95.57. That will be found on page 5 of the report of that institution for the year ending November 15, 1904, which disagrees with Doctor White.

(The above-mentioned report is filed herewith, marked "Exhibit Emmons No. 14.") (See page 1770.)

I want to make the further statement that I have made a comparative statement of the expenditures of the Government Hospital for the Insane at the time Doctor White took charge. It is from the report of 1903 to the present time—1905—as to the salaries and wages, and I find that the superintendent, physicians, and general office shows \$28,324.77, on page 23 of the report of 1903. On page 30 of the report for 1905 it shows \$34,748.84, an increase in the salary list of that special department of \$6,424.07, an increase of about 24 per cent in the salaries of that department.

The ward service shows a salary list for attendants, etc., at the close of the fiscal year 1903, \$95,223.79. When Doctor White took charge, the report of 1905 shows the ward service to cost \$100,984.46, an increase of \$5,760.67, or about a 6 per cent increase in the salary list. The inside domestic department, I see, increased \$4,868.20, and the engineer's department increased \$4,919.16, about 25 per cent increase.

I only want to state that the population of the hospital has increased about  $8\frac{1}{2}$  per cent during that period of time, and there has been a total increase of salaries of about 23 per cent. I would naturally expect a large portion of the increase to appear in the ward service, but I do not find that the salaries have been increased or the money spent for the ward service in proportion with the other increases. It is only 6 per cent. The hospital has increased  $8\frac{1}{2}$  per cent in population, yet the increase for the attendants upon the wards has only been 6 per cent. I would expect a large amount of the money to be spent for the benefit of the patients. I will just put this table that I am referring to in evidence. Before doing that, however, I find also that outside of this there has been an increase, as the testimony shows, as follows: Doctor O'Malley, \$1,500; Mr. Offutt, an increase of \$500; Mr. Sanger, an increase of \$600, and Mrs. O'Brien, \$720, and one librarian. Doctor O'Malley was in a new position, and Mrs. O'Brien in a new position.

(The above-mentioned table is filed herewith, marked "Exhibit Emmons No. 15.") (See page 1770.)

I also have here some letters which I desire to place in evidence, showing the basis upon which we make our calculations. They are letters from superintendents of various asylums, showing how we have received the per capita cost and the basis upon which we have based our report, showing the per capita cost of each different institution.

(The above-mentioned correspondence is filed herewith, marked "Exhibit Emmons No. 16.") (See page 1771.)

I have here a diet list, which I obtained from the superintendent of the Washington Asylum Hospital, which is the almshouse, which I think compares very favorably with one of the diet lists of the asylum, and I will state that the per capita cost of that institution is just about \$100. That includes all necessary medicine and medical attendance, and so forth. I will say that it has about 750 people, or thereabouts—possibly 800—and I served there for about two years. Every bit of the material that is bought there—medicine, food, and supplies of every kind—is bought by contract, and there is not a dollar of the money that passes through the superintendent's hands. All of the bookkeeping, so far as the financial bookkeeping is concerned, is done at the auditor's office in the District building.

(The above-mentioned diet list is filed herewith, marked "Exhibit Emmons No. 17.") (See page 1782.)

I also have here the report of the Northampton Insane Hospital, in Boston, the per capita cost of which is \$176.81. It also shows here a diet list, which I think is far superior in every respect to the diet list which has been placed in the record, and it also states here that "all persons have roasted turkey at dinner on Thanksgiving Day and on Christmas, with vegetables, celery, cranberry sauce, pudding, pie, and cider."

I will place that in evidence.

(The above-mentioned report is filed herewith, marked "Exhibit Emmons No. 18.") (See page 1783.)

Mr. HAY. What is the size of that institution?

Doctor EMMONS. The whole number under treatment was 1,153. The daily average, I think, is 791.

Mr. HAY. Seven hundred and ninety-one?

Doctor EMMONS. Seven hundred and ninety-one. The per capita cost, of course, for that number would naturally be greater than it would be where you had three times that number to treat. I want to show, as a matter of record here—something has been said relative to camisoles and their nonuse—that on page 15 of the report of 1904, 28 camisoles were made in the sewing room of that institution. The Government Hospital for the Insane, and they were made, probably, for use. They must have had some on hand at the time. (On page 12 of the report of 1905 it shows that they made 45 camisoles in the sewing room, and they were probably made for use.)

This is the report of the Washington Asylum Hospital, which shows the per capita cost in the almshouse to be something less than \$100. I have it here. The per capita cost, including employees, was \$100 in the hospital, \$69.78 in the almshouse, and \$92.44 in the workhouse.

Mr. HAY. Is there anything else you wish to say, Doctor?

Doctor EMMONS. I want to state this, that in my opinion as to the question of restraint, I do not believe that it should be necessary to restrain any patient. I have had, as I say, some four years' experience. We had one ward in which we had the insane, and we had some very violent cases—a few, not many. I have visited, also, the asylums of Virginia and Maryland, and have given considerable time to the study of the subject. I do not believe that under proper conditions it would be necessary to restrain any patient in any manner.

Mr. HAY. You say under proper conditions. What do you mean?

Doctor EMMONS. I mean if the proper classification was had and if sufficient attendants were employed in a special ward where such cases were held and they were transferred to a ward of that kind. As a rule these violent outbreaks last only a short time. The best method of controlling them, in my opinion, is either the cold pack or a long walk. Muscular fatigue is probably the best hypnotic that you can get. Take the patients out with two or three attendants, if necessary, and give them a walk out in the grounds; get them away from such influences as seem to irritate them.

Mr. HAY. Do you know anything about the conduct of affairs out here at St. Elizabeth's?

Doctor EMMONS. I have been there a number of times, and I must say this for the institution, that they are very fortunate in having probably the best set of buildings of any institution I know of. Congress has been very generous with them. There ought to be no trouble in having a fine classification with the advantages that they naturally have. From the testimony I am convinced that the classification at present is defective in that, especially, the epileptics are allowed, for instance, to eat the same food. Epileptics, in my opinion, should be on special diet. They are liable to have a fit at any time. A large piece of meat or a piece of bone may get in their throats and they will choke. There have been instances of cases of death right there from choking by pieces of meat lodging in their throats. Some of those cases may be due to paralysis, but possibly put down as a fit of epilepsy. I think they should be in special wards and should be classified according to epilepsy, and not insanity, and also a special diet should be given.

Mr. HAY. What cases do you speak of, Doctor? You say there have been cases.

Doctor EMMONS. I say there have been cases of that kind.

Mr. HAY. How long ago?

Doctor EMMONS. I do not just remember the time, but I could give it to you from the coroner's record of cases of that kind. This is a record, or a transcript that I made from the record:

Asphyxia due to engorgement of the throat, in trachea, accidental.

That was in 1901.

Asphyxia, due to food in air passages, accidental.

That was in 1902.

Mr. HAY. They were cases of what disease? Did these people have epilepsy, or what?

Doctor EMMONS. I do not know exactly the disease they had, but it has happened in other institutions where there were epileptics, and I have known of very serious trouble from epileptics. Their meat should be ground. They should be fed ground meat always.

Mr. HAY. Do you know of any epileptic cases dying in that way at the Government Hospital for the Insane?

Doctor EMMONS. I can not say that I know of any specific case; no.

Mr. HAY. Have you sent any patients there yourself?

Doctor EMMONS. Yes, sir; I have sent a number of cases there.

Mr. HAY. How have they been treated?

Doctor EMMONS. One of the cases has been testified to. That was the case of Mrs. Wright. I attended her. I finally operated on her and sent her there. I think she was insane for about eleven days at

home before I sent her there. I sent her there, not because I thought it was absolutely necessary for her to have the asylum treatment, but because of the fact that they were living in a flat, and they were people of very moderate means. It was quite noisy, and they could not afford to have a nurse with her. During the time she was home she was extremely restless. I had sewed up a lacerated perineum, and I wanted it to heal, of course, and I had a nurse assigned right to the bed. We were not compelled to put sheets on that woman. The nurse sat by the bed, and when she would make an effort to move we tied her feet together, but not to the bedpost at all. She could move her feet. That would not in any way disarrange the stitches.

On the eleventh day, after having paid the nurse, we were unable, as I say, to continue the treatment at home and we sent her to the asylum. I visited her there. I saw her there about a week after she was sent there. I went there to see her. I went in the room and found her restrained in one of these restraining sheets. I made an effort to take her pulse, and I found that her hands were under the sheet. While I was there in that room a patient that I knew personally, a Mrs. Connell, came rushing in. She was a melancholiac, and very excited. She came rushing in, yelling, and it seemed to disturb the patients a great deal, so much so that I led the girl to the door. There always has been, to my mind, bad classification, absolutely bad. There is a case that should have had absolute quiet and rest, and yet here was this melancholiac coming in where there was a case which should have had absolute quiet, and where everything should be held out for recovery. Those cases usually recover, and this case did recover, in spite of the conditions.

Mr. HAY. Mrs. Wright, you say, had her feet tied?

Doctor EMMONS. She did.

Mr. HAY. Was she injured by it in any way?

Doctor EMMONS. No; I can not say that she was injured, but I do say that by the assignment of a nurse to that case the restraining sheet would not have been necessary. Of course, if they had not sufficient nurses it would have been proper to tie her feet.

Mr. HAY. You think, then, that a nurse should have been assigned to her at the hospital?

Doctor EMMONS. A special nurse, yes; because the case was not only a case of insanity, but an operative case.

Mr. HAY. Suppose they did not have a nurse to assign?

Doctor EMMONS. Then the treatment was proper, if they had no nurse. It would never have done to have allowed the woman to get up and walk around.

Mr. HAY. Do you think she was cruelly treated by being so restrained?

Doctor EMMONS. I say that any restraint, unnecessary restraint, which can be avoided is cruel.

Mr. HAY. But I understood you to say this would be necessary restraint unless they could have assigned to her a special nurse.

Doctor EMMONS. Lacking the nurse, I say it was not cruel.

Mr. HAY. Did you inquire about that?

Doctor EMMONS. No; I did not.

Mr. HAY. Did you complain to the physician in charge?

Doctor EMMONS. When I came out, had I seen Doctor Clark I intended to have spoken to him of it. I saw Doctor Clark when I went in, and I waited some time before I could get him to the ward. After some little time a nurse came and took me into the ward and I spent a few moments there, and, as I say, it was quite noisy. I attempted to converse with her, but I could only get one or two words out of her.

Mr. HAY. You did not think the restraint was of such a character as to lead you to complain to Doctor Clark, did you?

Doctor EMMONS. No; under the circumstances I did not think it was a case of extreme cruelty, by any means.

Mr. HAY. Did you think it was a case of cruelty at all, under the circumstances?

Doctor EMMONS. No; but I do say the management was open to criticism for not having a special nurse there.

Mr. HAY. You would not say, however, that the patient had been cruelly treated?

Doctor EMMONS. No, sir; I would not say that.

Mr. HAY. Do I understand you to say that there are cases in which, if it is impossible to assign a nurse, that these restraints which have been described during the course of this investigation should be used?

Doctor EMMONS. They should be used, as I say, where you have not sufficient attendants to handle them properly, and where the classification is such that the patients themselves can not aid.

Mr. HAY. Then what you propose would be an increase in the number of attendants?

Doctor EMMONS. An increase in the working staff of the hospital—that is, in the attendants. I think they have an ample force of physicians. I would also suggest, as an improvement, that they have music more frequently. There is no question about the value of music in the treatment of insanity, and I would suggest that they have a paid band there, and that every member be paid not less than \$40, and that they be required to play daily.

Mr. HAY. You would suggest the creation of a band to be paid by the Government?

Doctor EMMONS. Yes, sir; a band to be paid by the Government.

Mr. HAY. On the order of the Marine Band?

Doctor EMMONS. Yes; and they could play daily. I would also suggest, as an improvement there, that a gymnasium be established and a swimming pool and bowling alleys and things of that kind. A large amusement hall should be erected for the purpose—that is, a gymnasium.

Mr. HAY. Do they have amusements of that character at other institutions, or do you know?

Doctor EMMONS. I can not give you the name of the institution, but I understand that one of the New York institutions, I am not sure which, and I think one of the Massachusetts institutions has such a gymnasium. I will not be positive; but, however that may be, there is no question in my mind that such an establishment would be a great improvement, because many of these men are men who need some exercise. It has been testified here that some of them are incapacitated for light farming work, and perhaps they are men who have not had experience in that line, yet a gymnasium in charge of



a properly qualified director would give these men the necessary physical development and keep their bodies in good shape.

Mr. HAY. Do you know of any instances of cruelty at the hospital?

Doctor EMMONS. Personally?

Mr. HAY. Yes.

Doctor EMMONS. Personally, no; I do not.

Mr. HAY. Do you know of any cases which you have sent there, or do you know of any cases sent there by anybody else, in which the patient has been in any way cruelly treated or neglected?

Doctor EMMONS. Not from personal knowledge, no; but only from what they have told me. I would also suggest the creation of a lunacy commission here for this reason: This asylum for the insane is the only asylum at the present time in the District of Columbia, but it is hardly to be expected that this will be the only asylum in years to come. The city is growing rapidly—at the rate of 3,000 each year—and the chances are that other institutions of that kind, either private or public, will be created, and you will then have an agency by which these institutions can be properly investigated and properly inspected. Under the present system it will be impossible for me or anybody else to create an asylum here and lock a man up, and it would take a court proceeding in order for anyone to get in. In other States they have a right to do that. In the first place, before you get a charter or a license to open a place they have the right to send the inspectors into those institutions.

Mr. HAY. Are there any private asylums here?

Doctor EMMONS. No; there are not now.

Mr. HAY. What inspection have these other institutions about which you have spoken?

Doctor EMMONS. You mean the Washington Asylum?

Mr. HAY. Yes.

Doctor EMMONS. For instance, the head of that institution is a business man. The present head of the institution was formerly the head of the Bayview Asylum, and he is a business man.

Mr. HAY. Is there any outside inspection?

Doctor EMMONS. They have a visiting physician who comes each day and goes through every ward daily. They do not know the exact hour when he will appear. He comes sometimes in the morning and sometimes in the afternoon, but he goes through the wards and inspects every part of the hospital.

Mr. SMYSER. One of the things that you think might be improved out at St. Elizabeth's is the classification?

Doctor EMMONS. Exactly so.

Mr. SMYSER. Do you think they are sufficiently equipped with buildings there to make the classification that you regard desirable?

Doctor EMMONS. I think so, with the addition of tubercular tents for the tubercular cases. As I understand the arrangement there for the treatment of tubercular cases now, it is simply partially outdoor treatment. They are not equipped, I think, for putting those tubercular cases that they have in open tents.

Mr. SMYSER. In other words, taking the tubercular patients, you think that the provision for their care out there ought to be abreast of what is regarded as the proper treatment for that class of people throughout the country?

Doctor EMMONS. I think so; yes, sir. And it could be done *very* easily and without much expense.

Mr. SMYSER. Has there been any improvement in the classification out there in the last few years that you know of?

Doctor EMMONS. I think the effort has been in that direction; yes, sir.

Mr. SMYSER. Has it not been going on as rapidly as it could?

Doctor EMMONS. That is a relative term—I suppose as fast as the present management could make it.

Mr. SMYSER. You are aware, of course, that you have a body to deal with here that is unlike a private institution. You have first to have appropriation made by Congress, and you have to consult the Secretary of the Interior, who, in law, is the head of that institution. You have taken those things into consideration, I suppose?

Doctor EMMONS. I have; and I have considered this question of the per capita cost in all fairness. For instance, take your own State of Ohio. There you have a per capita cost of about \$135, say. If you take your per capita cost and put it in operation in St. Elizabeth's, in ten years you will have saved \$2,000,000. You can figure it out. Therefore I say—

Mr. SMYSER. I want to analyze that a little. From what you have already said, I take it that you would not want to begin to lop off with the employees?

Doctor EMMONS. Not at all.

Mr. SMYSER. And that, in fact, their pay ought to be increased?

Doctor EMMONS. Yes, sir; and the increase in the salaries of employees during the three years of the present management was only 6 per cent; whereas the increase in the salaries of the physicians and general officers was 24 per cent.

Mr. CLARK. I want to come to that; but you would not lop it off of the employees?

Doctor EMMONS. No, sir; I should add to it.

Mr. SMYSER. Then, as to the superintendent, and from him down the staff immediately under him—and when I use the word “staff” I mean the physicians—

Doctor EMMONS. I would say that the salaries of those physicians could be cut at least from 25 to 50 per cent and still leave a salary that compares favorably with the majority of the asylums in the country.

Mr. SMYSER. The food products you have heard testified to are nearly all bought by competitive bids.

Doctor EMMONS. They ought all to be bought in that way.

Mr. SMYSER. How is that?

Doctor EMMONS. I think everything should be bought in that way.

Mr. SMYSER. There are some things, perhaps, that you could not get. Could you buy everything in that way?

Doctor EMMONS. Yes, sir; everything is bought in that way, I understand, for the Bayview Hospital, an asylum in Baltimore, and also for the Washington Asylum here. It is bought by contract. We have a right to send back goods which are purchased under contract just the same as we have with goods bought on the open market. The goods can be bid for, and you have a more accurate knowledge of what your expenses are going to be in a given

year. You are not subject to the fluctuations in price, as you might be under an open-market arrangement.

Mr. SMYSER. I understand that last year about \$60,000 worth of goods were bought in the open market.

Doctor EMMONS. Yes; and it cost the Government \$1,500 to buy that, in addition to the maintenance.

Mr. SMYSER. If it had been bought under contract, including the \$1,500 that the Government might have paid, how much could have been saved by that system of purchase?

Doctor EMMONS. I think you could save considerable. There is no reason why you could not.

Mr. SMYSER. How much?

Doctor EMMONS. I do not know how much, but I do not see why you could not buy butterine by contract. There is more than one company that makes butterine. There is more than one concern that makes clothes. You can buy clothes, as has been testified to by Mr. Barrie. There is no good reason, in my mind, why you could not buy clothes.

Mr. SMYSER. How much out of that \$60,000 could have been saved, in your opinion, by competitive bidding?

Doctor EMMONS. That would be a matter of pure guesswork. It is a matter of opinion; but, to my mind, to open up the market to competition for that \$60,000 worth of supplies would result in a saving.

Mr. SMYSER. Well, how much?

Doctor EMMONS. I should say at least 10 per cent could be saved, sir.

Mr. SMYSER. How much?

Doctor EMMONS. Ten per cent, at least. It costs the Government about \$2,000, or something like that. I think they could save, at least, from 8 to 10 per cent, for this reason: You would do away with the necessity of a purchasing agent, because it does not appear from the testimony, in my opinion, that the purchasing agent does anything more than what a messenger or a telephone would do. The goods are received by the different departments, and they are inspected by the different departments. He simply acts as a messenger to order so much goods. It does not appear here that he inspects the goods in the market, and that his inspection is final, but the goods are ordered and sent over; and that can be done by the man who receives the goods, by telephone.

Mr. SMYSER. You heard the testimony as to how these goods which are bought in open market are bought?

Doctor EMMONS. Yes.

Mr. SMYSER. That he goes around to the different people here?

Doctor EMMONS. Yes.

Mr. SMYSER. Is that not in one sense purchasing in the open market?

Doctor EMMONS. That is purchasing in the open market, it is true, but there does not appear to be any advertised notice, for instance, that it is desired to purchase so many dozen eggs, and that the purchasing agent will come at such and such a time to inspect the character of the eggs, and so on.

Mr. SMYSER. How many egg dealers have you got here?

Doctor EMMONS. There are quite a number. There are Golden & Co., Mr. Oyster, Chapin & Sacks—

Mr. SMYSER. Suppose your superintendent, or the purchasing agent out there—I do not care which way you speak of it—wanted 500 dozen eggs. Now, suppose there had not been any contract for that by competitive bidding, would you go to your dealers here—John Jones and Sam Smith, and the rest of them—and see what they would furnish those 500 dozen eggs for?

Doctor EMMONS. If I had advertised and could not receive bids for those goods I would go to the telephone and call up a reputable house and get its price. I would get the prices of two or three, and take the lowest price that was submitted, and have him send the eggs over.

Mr. SMYSER. You would regard that as good business, would you not?

Doctor EMMONS. I certainly would.

Mr. SMYSER. Is not that just the way it has been done here?

Doctor EMMONS. No; it is not. Except the advertisements for these goods that are eminently proper, in my opinion, to be placed in the contract—

Mr. SMYSER. I want to keep at the eggs.

Doctor EMMONS. The eggs would be purchased by contract just the same as on the open market, and even at a better price.

Mr. SMYSER. Eliminating the price, is not that a good business transaction?

Doctor EMMONS. Yes; but I would not pay \$1,500 to order eggs.

Mr. SMYSER. I am not talking about that, but about the eggs themselves.

Doctor EMMONS. That is the only way to get them. If you can not get them by bids, you must buy in the open market. There are only two ways.

Mr. SMYSER. That would apply to anything bought in the open market—fresh fish, for instance?

Doctor EMMONS. Yes; we bought those by contract in the Washington Asylum.

The CHAIRMAN. What do you pay in that institution?

Doctor EMMONS. We must pay less, because the per capita cost—

Mr. SMYSER. I am not talking about what you must do, but what you do pay.

Doctor EMMONS. We must pay much less; I don't know.

Mr. SMYSER. That is not an answer. I want to know.

Doctor EMMONS. I would like to answer as you desire me to, Mr. Smyser, but I can not.

Mr. SMYSER. How much less do you pay for fresh fish that you get by competitive bid—by contract—than they pay for fresh fish over at St. Elizabeth's?

Doctor EMMONS. That could not be determined, unless it was tested for perhaps two years consecutively. The markets would shift, and the prices would shift, and the conditions of the market would be different, but when these bids are taken a number of bidders come into it and speculate. They speculate on it. Sometimes they lose, and the Government gets decidedly the best of the bargain. And other times they may get the best of it.

Mr. SMYSER. I want to come back to this proposition. You said distinctly that fresh fish, for instance, could be bought by contract, and that your institution there bought by contract. Now, as to whether or not the business methods of the Government are wise or unwise, I ask you what you pay in your institution for the fresh fish that you buy under contract? We can very readily ascertain what they pay out here, and then we can compare them and see.

Doctor EMMONS. If you desire me to answer that question, I am going to try to do it. I will state this: The only fair comparison would be to compare the whole cost of the institution——

Mr. SMYSER. No, sir. I still insist. You said that some institution with which you are connected bought, for instance, fresh fish by contract.

Doctor EMMONS. Yes, sir.

Mr. SMYSER. And it turns out that over at the Government hospital they are bought in the open market. You were making that as a criticism upon the business management. Now, my question is what did you pay under the contract system for the fresh fish in the institution with which you are connected?

Doctor EMMONS. In answer to that question I am going to correct the question in so far as it affects my answer. That is this, that the position I take is that on the contract system for all the goods it is decidedly better, and, in fact, is the best system that I know of. It is much better than the open-market system, in my opinion, so far as the economical point of view is concerned.

Mr. SMYSER. Suppose I say that I agree with you. I still ask what did the institution to which you belong pay for its fresh fish under contract?

Doctor EMMONS. I could not say, because I do not know; but I do know the general results.

Mr. SMYSER. Then you are not prepared to say that your contract purchase of fresh fish is a saving over the purchase in the open market, are you?

Doctor EMMONS. It may be either of the two. There might be a saving in some cases, and sometimes it might show a decided increase in cost. At other times under the contract system it might show a decided decrease in the cost. That is true, but the general result is that this institution here feeds its patients on \$100 a year, and over here it costs \$220 and over. That is a question of argument as to which is the best.

Mr. SMYSER. With all due respect, Doctor, you still have not answered my question.

Doctor EMMONS. I am sorry I can not answer it in your way, Mr. Smyser.

Mr. SMYSER. No; for instance, if it should turn out that under the contract system in vogue in the institution to which you belong the average price of fresh fish is, say, 8 cents a pound, and it should turn out that over at St. Elizabeth's the average price, bought in the open market, is 7½ cents a pound——

Doctor EMMONS. Then I would say pay 10 cents a pound by contract, even against the 7½ cents on the open-market purchase, because I would know exactly what I had to pay in the next year. I would have, for instance, my meat account. I would have bids for my meat,

for my fish, for my eggs, and everything. There would be no possibility of my running short, because I would have my bids before the fiscal year was ended, and I could go to Congress with an absolutely accurate and fixed amount of money to ask for for the sustenance in a given year. There would be no such thing as a possibility of running short and making a deficiency.

Mr. SMYSER. Well, certainly that in the main is correct, but I am going to stick to this item of fish as an illustration. If that is bad business management over there we want to know it and to make it up. There has been a comparison here of the price paid by the St. Elizabeth Hospital where they buy in the open market with the contract price where they buy under contract.

Doctor EMMONS. Yes; but you should take the contract price for the last two or three years and get a couple of year's prices, and I suppose take the prices paid over there for two or three years and add to it the expenses of purchasing—that is, the purchasing agent's salary and his maintenance there, because he might have perquisites about his office. Add that and then you could strike a balance, possibly.

Mr. SMYSER. In other words, it is one of the criticisms you have to make on the business management over there that you believe all their goods ought to be bought under the contract system?

Doctor EMMONS. Absolutely all. Of course, I mean—for instance, at the Washington asylum we used to buy our drugs on contract, from a certain druggist. There would be a certain article, say, that we would want, and it would not be on the contract at all. We would buy it from him at the price quoted in the market that day. If quinine was quoted at \$2 a pound, say, or whatever it might be, we would buy at that quoted price.

Mr. SMYSER. You would have to have it.

Doctor EMMONS. But why should we have a special party to buy that quinine when we could go to the telephone and order it?

Mr. SMYSER. Are there instances where they have paid a high price? Take drugs, for instance?

Doctor EMMONS. I never made a calculation as to the whole market of that year or the year previous, but, as I say, it appears to me from my experience, and it is my opinion, that that is the only way for any government to conduct an institution—for accuracy and for systematic knowledge as to what the expenses will be is to have a contract for everything they buy.

Mr. SMYSER. Your criticism, then, comes back to the law and to Congress, does it not?

Doctor EMMONS. I should think Congress should see to it, in the first place, that the institutions are run on a business basis and that there is an equal and fair show, for instance, to all parties to come into a competitive arrangement to secure the patronage of the Government. Under this system I can not see how you can eliminate the possibility of favoritism. I would like to be the fortunate merchant who would sell the fish and the eggs to the institution.

Mr. SMYSER. I beg your pardon.

Doctor EMMONS. I say I would like to be the fortunate merchant that would sell the fish and eggs to the institution at market prices.

Mr. SMYSER. You used the word "favoritism." That is what I want to get at.

Doctor EMMONS. Yes; can you see, under such a system—

Mr. SMYSER. What I want to get at is this: Your answer leads me to make this interrogatory: Do you know of instances of favoritism from the authorities of the institution over there because of the fact that certain goods were not bought under contract?

Doctor EMMONS. No; let me explain. I do not want to be understood as reflecting upon the present purchasing agent of this institution or upon this institution in so far as it might affect anyone personally. But I mean to say that the proposition holds good that institutions generally where they buy in the open market are not holding themselves out equally to every merchant in the town, because it is a matter of judgment and it is a matter of the personal decision of the purchasing agent as to who he shall buy these goods from.

Mr. SMYSER. What do you think of the class of attendants they have over there?

Doctor EMMONS. Now, you asked me for my opinion. From what I understand of them and from what I can hear of them, they are very good attendants.

My opinion, however, is that in order to limit the possibility of cruelty—and I am convinced from this testimony there have been instances of cruelty—I would place in charge of each ward of that institution a female nurse. There is no question in my mind, from my experience, that female nurses are better equipped generally than male nurses for nursing. Women are natural nurses, and they take to the training very readily. For instance, I understood there were about four male attendants in the training school as against double or treble that number of women, showing that they naturally take the training. They are more anxious to take training. They make better nurses. They are not as cruel hearted, and it would be my effort to replace largely the male attendants there by females, retaining the males, of course, on certain of the wards; but my experience has been that many insane men who are inclined to be violent are very easily managed by women.

The ACTING CHAIRMAN. What have you to say about the medical staff over there?

Doctor EMMONS. The medical staff is very good; but I might say this: They owe the institution a great deal, many of them. They have received their appointments immediately upon coming out of college, with no experience whatever. The Government has afforded them an opportunity to gain experience, and they owe to the Government the education they have.

The ACTING CHAIRMAN. What am I to deduce from that? Who is to blame for that condition?

Doctor EMMONS. I think the civil service is, myself. I think it is a very poor system. I really believe that the Superintendent should select his own staff.

The ACTING CHAIRMAN. I agree with you.

Doctor EMMONS. I do not believe any civil-service examination will determine a man's fitness as a medical man.

The ACTING CHAIRMAN. Your experience and observation lead you to the conclusion that in the selection of a medical staff over there the Superintendent ought to have the right to select rather than to have his staff designated by some board. Is that it?

Doctor EMMONS. I think so.

The ACTING CHAIRMAN. You believe he would get better service in that way?

Doctor EMMONS. I think he could get more experienced physicians than he has.

I have heard the expression here, too, from the attendants, that they had had to strike a patient in self-defense. I do not believe that should ever be permitted. I can not see how it can be justified. The fact that an attendant had to strike a patient in self-defense means one of two things: Either that he was too quick to strike or that he was left in such a position that it was a necessity.

The ACTING CHAIRMAN. Such instances will happen in almost any institution, will they not?

Doctor EMMONS. They may happen occasionally, but with the proper force at hand I do not think it would ever be necessary to strike a patient. Two or three attendants could handle any man—that is, without harming him, without it being necessary to strike him.

The ACTING CHAIRMAN. That is, if they were there?

Doctor EMMONS. If they were there. They should be there.

The ACTING CHAIRMAN. Then is it your idea that Congress ought to make such provisions that there would be on hand a sufficient force of attendants to anticipate every emergency that might arise among 2,600 people?

Doctor EMMONS. No, sir; but they should have that proportion of attendants which they have in other institutions. For instance, I handed in a list of 6 that I was able to get reports from, showing that there was one attendant to an average of 5 and 6 patients, and the attendants should be nurses. Every attendant should be a nurse. They should take training. There should not be one of those attendants over there that should not be compelled to take training. They would make better attendants, because, really, they would be nurses, and by having such a proportion as I speak of and compelling them to work only eight or possibly ten hours—the nurses here in the city hospitals work ten hours—they would be fresh. They could devote their whole time to actual nursing and the patient could reap the benefit of it. They would be in better humor to stand many things that now irritate them.

The ACTING CHAIRMAN. Doctor, in respect to the treatment of patients, is it your judgment that they are trying to keep abreast of the times over there in the treatment of this class of people?

Doctor EMMONS. I think they make that effort; yes. I will say this: You will find that not more than 1 doctor in 50 takes any special interest in the treatment of the insane, and many of these questions that are brought out here are new questions entirely. I went to the Census Office this winter in order to get some statistics for this work, and I found that they did not at that time have even the number of attendants or physicians or any of the information that I desired to get. All I could get from them were the names of the different hospitals. They could not give me the names of the superintendents of those hospitals in the States. I did get a complete list of every asylum in this country. I do not believe you will find it in print anywhere. I will say that many of these questions are new questions.



The ACTING CHAIRMAN. That is just what I was thinking.

Doctor EMMONS. And it gives the committee a very good chance to improve this opportunity they now have.

The question, however, of the separation of the criminal insane is an old one. At the present time they have over there the criminal insane, as I take it from the testimony, confined in a building; and I believe it has been testified here—I may be mistaken, but I think I am correct—that only a few of those men are allowed the privilege of walking in the grounds. They are compelled to exercise in a little inclosure which is made by the buildings themselves. I do not suppose it is more than about a hundred feet square.

Mr. HAY. Are you speaking of Howard Hall now?

Doctor EMMONS. Howard Hall. Those men stay there from morning until night. I do not believe it has been testified here that there is a pool table or an amusement of any kind whatever in that hall.

The ACTING CHAIRMAN. They allow them to play the old-fashioned game of seven-up over there, and that has subjected the institution to much criticism.

Doctor EMMONS. I understand they play crap over there, too.

The ACTING CHAIRMAN. I do not know about that.

Doctor EMMONS. In that hall.

The ACTING CHAIRMAN. Do you believe in card playing as a means of diversion?

Doctor EMMONS. Yes, sir; I do.

The ACTING CHAIRMAN. In other words, this is your idea—and it is true throughout the country generally—that in the treatment of the insane diversion of various kinds is beneficial?

Doctor EMMONS. Yes, sir.

The ACTING CHAIRMAN. And it is resorted to in all institutions, is it not?

Doctor EMMONS. Yes, sir.

The ACTING CHAIRMAN. Out at Massillon we have a baseball team made up of lunatics. They play baseball and football. You believe that diversion of various kinds—music, dancing, and things of that kind—are profitable?

Doctor EMMONS. Yes, sir.

The ACTING CHAIRMAN. And as much outdoor exercise as the patients can get?

Doctor EMMONS. A great deal of outdoor exercise. As I say, I speak for these poor people there. If it is true that they are not taken out for walks, I do not believe it is right. I believe those men, even though they are criminals and insane, should have sufficient attendants seeing to that building to take those men out daily for a walk and to give them something more than the walls of that particular hall to view. I believe this, that as a benefit to that institution, those people should be transferred to a separate place.

The ACTING CHAIRMAN. Have you ever urged your views upon Congress in that regard?

Doctor EMMONS. I certainly have.

The ACTING CHAIRMAN. What headway did you make?

Doctor EMMONS. The Medico-Legal Society put a bill in the Judiciary Committee of the House, and it is sleeping there.

The ACTING CHAIRMAN. And you expect it to sleep the sleep that knows no waking, do you not?

Doctor EMMONS. We hope this committee may see the virtue of the bill and recommend it.

The ACTING CHAIRMAN. In other words, here is another criticism you have to make. Classification is going on. It is not yet complete, and some of the patients ought not to be in St. Elizabeth's at all. There ought to be a separate institution?

Doctor EMMONS. Exactly so.

The ACTING CHAIRMAN. There is another thing that is true, is there not? It is a very convenient place for the people of Washington?

Doctor EMMONS. I believe myself that the District should be compelled to take care of its own insane.

The ACTING CHAIRMAN. It has not done its duty, has it?

Doctor EMMONS. I do not think so.

The ACTING CHAIRMAN. I call attention to the instance you give of Mrs. Wright. You put her out there as a matter of convenience to her and the family because she could not be cared for properly elsewhere, did you not?

Doctor EMMONS. Exactly so.

The ACTING CHAIRMAN. Is not what is true in the Wright case true all over the city and all over the District here?

Doctor EMMONS. It is true, and, as I say, it is the only thing that can be done under the circumstances. I must say this, that while the District has been sleeping upon its own rights, while it has not been as active as it should have been in looking after its own interests—

The ACTING CHAIRMAN. You mean, do you not, sleeping upon the rights of the Government generally?

Doctor EMMONS. Oh, no, sir; for this reason: The District of Columbia pays \$220 per capita. It could take care of its insane satisfactorily to its citizens for a per capita of something like \$150, easily.

The ACTING CHAIRMAN. How long has that been the fixed price?

Doctor EMMONS. I do not think that per capita has been changed in the past ten years.

The ACTING CHAIRMAN. And yet the Medico-Legal Society and the citizens generally—

Doctor EMMONS. We have only been in existence three years.

The ACTING CHAIRMAN. Have been here all this time and have not undertaken to correct that?

Doctor EMMONS. I must say, in answer to that question, which is almost an answer in a way—the question you ask whether the Medico-Legal Society has been sleeping—that the Medico-Legal Society is about 3 years old, and I think it probably has its existence known at this time as much as any other of the moving agencies for reform.

The ACTING CHAIRMAN. But I still come back, and I mean to include your society with the body of residents here in the District. You have not done anything by way of relieving the condition of things out there at the hospital. You have not suggested, "Here we are paying \$220 a year, and we ought to be able to have an institu-

tion that could be conducted at a good deal less price." That has not been taken up?

Doctor EMMONS. No; for this reason: We have, unfortunately, in this city an absence of public sentiment. Public opinion is not formed here by the people generally, but it waits upon the press to form it. You must remember that we have no politics in this city. We are American citizens, but we are denied the right to vote.

The ACTING CHAIRMAN. I thought I was going up against politics every day here.

Doctor EMMONS. No, sir; there is absolutely no politics in this city. If it were possible that these questions of public concern could be discussed, and discussed thoroughly, there would be some agitation in that line.

The ACTING CHAIRMAN. Then is it your idea that this committee now is the avenue through which these matters are to be brought not only to the attention of Congress, but of the people?

Doctor EMMONS. The only avenue; yes, sir. The only avenue we can appeal to is this committee or some committee of Congress.

The ACTING CHAIRMAN. You think there ought to be a commission of lunacy here in the city?

Doctor EMMONS. I certainly do.

The ACTING CHAIRMAN. Just briefly give me your idea of what ought to be the functions of that commission.

Doctor EMMONS. I might state that that commission ought to be, in my opinion, appointed by the President. It should have a paid inspector. That is, the commission should have a paid inspector whose duty it would be to visit the various asylums of this city and the various insane asylums of the Government. For instance, the Government has an insane asylum in Indian Territory for the Indians. It has one up in Washington State, I believe, or Alaska, I am not sure which; but it has three asylums itself now under the control of the Secretary of the Interior.

Possibly the District of Columbia may have a number of private institutions spring up here, and it may possibly some day have its own municipal insane asylum, so that the time is very near at hand, in my opinion, when the usefulness of that commission would be of very great benefit. That inspector could visit from place to place these various asylums and make his reports to the commission. The commission could make its semiannual or its quarterly visits. There is in the District an inspector of saloons. The saloon keepers must procure their licenses each year. They must be reputable men. They must conduct their business in a reputable and businesslike manner. At the same time, in order to protect the public and see that the regulations prescribed for the management of that business are carried out there is a paid inspector, whose duty it is to drop in on these saloons at different times. He makes his report to the excise board. Just so the inspector I refer to should make his report, and if he reports that in his opinion the conditions are such as to require investigation the whole board should investigate the matter.

The ACTING CHAIRMAN. Do you not think that is the very idea of the act creating the board of visitors? Do you not think that is their function?

Doctor EMMONS. It is outlined as their function, but there is a question in my mind of the physical ability of some of the members of that board to perform the functions. They are all elegant gentlemen, men of reputation, and I think men who are mentally capable.

The ACTING CHAIRMAN. I am not speaking of the character of the visitors, but of the character of the office, the functions of the board of visitors. Do you not believe that under the law as it now stands—

Doctor EMMONS. I do not believe they have sufficient power as it is. I understand, for instance, that their order is paramount to the superintendent's. The superintendent can even countermand their order. That board is an advisory board. It does not have the right, for instance, to discharge the superintendent if, in their opinion, he is not properly managing the business affairs of the institution, nor can they take any steps leading to it, from what I can understand. They can advise him that such and such things are not right. Then it is not a paid board, and those men are doing a labor of love.

The ACTING CHAIRMAN. Do you think that ought to be a paid board?

Doctor EMMONS. There ought to be an inspector who would be paid for his services.

The ACTING CHAIRMAN. I am talking about the board of visitors. Do you think that ought to be a paid board?

Doctor EMMONS. I do not see why not. For instance, there could be a smaller board, and they could be paid for their services. Active men could be appointed, and I do not see why a reasonable fee should not be paid them for the work. Then they could be required to do it.

The question of butterine was up here yesterday. I will state while I am here that the Washington Asylum takes care of its people for \$100, and we serve butter there.

Mr. HAY. What sort of butter, Doctor?

Doctor EMMONS. Very good butter. I have eaten it. We get the same butter the patients get, at 24 cents a pound, and it is very good butter. Doctor Godding, when he was at the asylum here, used butter entirely.

Mr. HAY. Who instituted butterine?

Doctor EMMONS. Your friend from Ohio—Doctor Richardson. He bought the first butterine, and he bought it from Ohio. It has been bought from Ohio since.

The ACTING CHAIRMAN. Well, they make a first-class quality out there?

Doctor EMMONS. I understand they have different grades of butterine. I looked over their advertising matter. I do not know what grade of butterine they get. The butterine that I see marked "standard butterine, pure butterine," is 20 cents a pound. I do not know whether they are buying that grade of butterine. There are grades of butterine just as there are of butter. The butterine that is manufactured in Ohio, by the Capital City Dairy Company, I believe contains a quantity of butter and then a mixture of these fats. I do not see why, if we are going to serve butter, we serve adulterated butter. It is an article of food that constitutes a part of each meal; and if economy is to be exercised, I would cut butterine out entirely

and give them no butter rather than give them something to which they must become habituated in order to enjoy it.

The ACTING CHAIRMAN. Is oleomargarine wholesome or nutritious?

Doctor EMMONS. Yes, sir; so is glycerin; so is castor oil. Any fat is nutritious.

The ACTING CHAIRMAN. But I want your judgment. Is butterine or oleomargarine nutritious and wholesome?

Doctor EMMONS. The difference between butterine and butter—

The ACTING CHAIRMAN. I am not asking the difference.

Doctor EMMONS. As to the wholesomeness of it, I would say, outside of the possibility that the process of manufacture has decreased the likelihood of bacteria being formed in butterine, that butter is more wholesome.

The ACTING CHAIRMAN. I am not asking for the comparison. Have you ever analyzed oleomargarine?

Doctor EMMONS. Personally, no; but I have heard of its manufacture, and I have read of the pros and cons of the question.

The ACTING CHAIRMAN. Is it nutritious and wholesome?

Doctor EMMONS. Some butterine is; yes.

The ACTING CHAIRMAN. How is it in regard to the kind they get out at St. Elizabeth's? Is that nutritious and wholesome?

Doctor EMMONS. I understand that it is; but hardly palatable.

The committee (at 12.15 o'clock p. m.) took a recess until 2 o'clock p. m.

#### AFTER RECESS.

The committee reassembled at the expiration of the recess.

#### TESTIMONY OF THOMAS MOFFETT.

THOMAS MOFFETT, having been duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. MOFFETT. My name is Moffett.

The ACTING CHAIRMAN. What is your first name?

Mr. MOFFETT. Thomas.

The ACTING CHAIRMAN. Are you connected with St. Elizabeth's?

Mr. MOFFETT. I am not now. I used to work over there.

The ACTING CHAIRMAN. When did you work over there?

Mr. MOFFETT. I worked over there up until October last.

The ACTING CHAIRMAN. When did you begin?

Mr. MOFFETT. I began April 22, 1901.

The ACTING CHAIRMAN. What were your duties?

Mr. MOFFETT. I was an attendant.

The ACTING CHAIRMAN. What ward were you in?

Mr. MOFFETT. I was assigned over there to Dawes Building. I went there first, and from there to Gray Ash.

The ACTING CHAIRMAN. How are the patients treated there?

Mr. MOFFETT. Well, the patients are treated, as far as I know, very good.

The ACTING CHAIRMAN. Who was your supervisor?

Mr. MOFFETT. Mr. Burch.

The ACTING CHAIRMAN. Do you know Kinsey?

Mr. MOFFETT. Yes, sir.

The ACTING CHAIRMAN. Was he a patient in your ward?

Mr. MOFFETT. Yes, sir.

The ACTING CHAIRMAN. Did you have any trouble with him?

Mr. MOFFETT. Well, on one or two occasions I did; yes, sir.

The ACTING CHAIRMAN. What was it?

Mr. MOFFETT. Well, he showed fight and he attacked me and we had a little scuffle, that is all—a little scuffle.

The ACTING CHAIRMAN. When he showed fight and attacked you what did you do?

Mr. MOFFETT. I didn't do anything, only to try and subdue him.

The ACTING CHAIRMAN. How did you try to subdue him?

Mr. MOFFETT. I did the best I could.

The ACTING CHAIRMAN. What was the best you could do? What did you do?

Mr. MOFFETT. I taken hold of him.

The CHAIRMAN. Did you hit him?

Mr. MOFFETT. No, sir; I did not.

The ACTING CHAIRMAN. How did you subdue him?

Mr. MOFFETT. I just taken hold of him and taken him to a room and locked him up; a strong room.

The ACTING CHAIRMAN. Was Lloyd an attendant there at the time?

Mr. MOFFETT. No, sir.

The ACTING CHAIRMAN. Were you ever on the ward with Lloyd?

Mr. MOFFETT. Yes, sir.

The ACTING CHAIRMAN. And Thrift and Tennyson?

Mr. MOFFETT. Yes, sir.

The ACTING CHAIRMAN. Did you ever see them—first, I will ask you, did you ever abuse a patient?

Mr. MOFFETT. No; I do not know as I did.

The ACTING CHAIRMAN. In doing what you did to Kinsey, was it necessary?

Mr. MOFFETT. I wouldn't call that abuse, only I had to do it. It was necessary for me to do it, what I did to him. I didn't strike him or anything like that.

The ACTING CHAIRMAN. Did you ever abuse any of the patients?

Mr. MOFFETT. No, sir.

The ACTING CHAIRMAN. Did you ever see them abused?

Mr. MOFFETT. Well, no, sir.

The ACTING CHAIRMAN. Oh, talk a little louder.

Mr. MOFFETT. I never seen them abused; no, sir.

The ACTING CHAIRMAN. What does Kinsey mean by saying that he was knocked down over there?

Mr. MOFFETT. Well, I don't know.

The ACTING CHAIRMAN. And that you saw it?

Mr. MOFFETT. I never seen him knocked down.

The ACTING CHAIRMAN. Not Kinsey, but some other patient.

Mr. MOFFETT. Who was the patient?

The ACTING CHAIRMAN. I don't know; I have not been able to find the name, but I catch an answer here, "Yes, sir; I have seen him get hold of a patient and knock him down on the floor and pound his

stomach until I thought the man would be dead." Who was he talking about?

Mr. HAY. Did you see any patient abused by anybody?

Mr. MOFFETT. No, sir.

Mr. SMYSER. You are a little weak in your answer. Is that because you do not want to tell?

Mr. MOFFETT. No, sir. I will do the best I can. I am kind of hoarse, that is all.

The ACTING CHAIRMAN. Take a little potash tablet; that will help that. Did you ever see anything of the kind that I have read here—of a man being knocked down there?

Mr. MOFFETT. No, sir.

The ACTING CHAIRMAN. Did you ever see Lloyd twist Kinsey's arm?

Mr. MOFFETT. No, sir.

The ACTING CHAIRMAN. Nothing of the kind?

Mr. MOFFETT. No, sir.

The ACTING CHAIRMAN. How is the food over there?

Mr. MOFFETT. Well, it is not so good.

The ACTING CHAIRMAN. What is wrong with it?

Mr. MOFFETT. Well, it is not cooked properly, and not served properly.

The ACTING CHAIRMAN. Do you mean that it is not sufficiently cooked, or too much cooked, or what?

Mr. MOFFETT. No, sir; it is not cooked enough.

The ACTING CHAIRMAN. What part of the food is not cooked enough? What do you mean—all of it?

Mr. MOFFETT. Well, the beef, for one thing, is not cooked.

The ACTING CHAIRMAN. Not cooked enough?

Mr. MOFFETT. No, sir.

The ACTING CHAIRMAN. You like yours well done?

Mr. MOFFETT. Yes, sir.

The ACTING CHAIRMAN. How are the potatoes cooked?

Mr. MOFFETT. Well, they are all right as far as I know. They are cooked all right.

The ACTING CHAIRMAN. Where are you from?

Mr. MOFFETT. I am from Virginia.

The ACTING CHAIRMAN. How old are you?

Mr. MOFFETT. I am 25.

The ACTING CHAIRMAN. Did you know Oppenheimer?

Mr. MOFFETT. Yes, sir.

The ACTING CHAIRMAN. Was he an attendant over there?

Mr. MOFFETT. No, sir.

The ACTING CHAIRMAN. What was he?

Mr. MOFFETT. A patient.

#### TESTIMONY OF JAMES G. PAYNE.

JAMES G. PAYNE, having been duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. PAYNE. James G. Payne.

The ACTING CHAIRMAN. What is your business?

Mr. PAYNE. I am auditor of the supreme court of the District of Columbia.

The ACTING CHAIRMAN. What duty, if any, have you to perform in respect to the appointment of guardians and the renditions of accounts?

Mr. PAYNE. I have nothing to do with the appointments. I have a good deal to do with the accounts.

The ACTING CHAIRMAN. The appointments do not come in your court. Is that it?

Mr. PAYNE. Not at all.

The ACTING CHAIRMAN. But in another court. But the accounts are adjusted there?

Mr. PAYNE. Most of them. Some of them are passed by the court without reference to the auditor.

The ACTING CHAIRMAN. In what cases does that happen?

Mr. PAYNE. Well, in cases of short periods of committeehip or trusteeship and where it is hardly worth while to refer the account to the auditor, it being all in one item or a few items or there being special circumstances that render it unnecessary, perhaps, to go through the form of an audit. Of that the court is always the judge. All the work that I do is done under special reference from the court.

The ACTING CHAIRMAN. Then, just what do your duties consist of when a matter is referred to you?

Mr. PAYNE. In so far as they are accounts it is my duty to see that the accounts are properly vouched; that allowances, where they are not already fixed by the court, should be made by me and should be reasonable and proper. I make a report of my account, as I state it to the court, and there it is subject to exceptions, and it may either be confirmed or the exceptions sustained.

The ACTING CHAIRMAN. You pass on it primarily?

Mr. PAYNE. Yes, sir.

The ACTING CHAIRMAN. And then it goes to the court for approval or not?

Mr. PAYNE. Yes, sir.

The ACTING CHAIRMAN. Or modification?

Mr. PAYNE. It always has to be confirmed by the court, either by the lapse of time without objection or upon a hearing of objections.

The ACTING CHAIRMAN. How are you, Mr. Payne, by way of exercising care in the payment of fees, for instance, to physicians or to guardians as compensation, or to an attorney?

Mr. PAYNE. Where the court has not made some rule on the subject, or has not had some practice that amounts practically to a rule, I do the best I can with claims of that kind. The fees of the physicians are pretty well established by a long-continued practice in the courts in these lunacy cases. The allowances to the committee vary, usually, between 5 and 10 per cent. I make those fees dependent upon the character of the estate, its size, the period which the service covers, and the character of the services themselves. In some cases they are much more difficult in their management than others, but the practice of the court ranges between 5 and 10 per cent.

The ACTING CHAIRMAN. It varies as you have described?

Mr. PAYNE. Yes, sir.

The ACTING CHAIRMAN. Dependent upon these conditions?



Mr. PAYNE. Yes, sir. In many of the cases I take proof myself. In all matters involving dispute I take proof as it would be taken before a court and jury and make my finding.

The ACTING CHAIRMAN. Do you exercise care in the discharge of your duties?

Mr. PAYNE. I try to.

The ACTING CHAIRMAN. Do you stand in with anybody?

Mr. PAYNE. No, sir; I would say not. I have held that office for twenty-five years, and I never was charged with standing in with anybody.

The ACTING CHAIRMAN. Well, I am asking you.

Mr. PAYNE. Yes, sir; and I answered it in the same way. It is a proper question.

The ACTING CHAIRMAN. Is there any collusion between you and Mr. Fenning, for instance?

Mr. PAYNE. Not the slightest in the world.

The ACTING CHAIRMAN. He does business there?

Mr. PAYNE. He has a great many committee cases.

The ACTING CHAIRMAN. Do you treat him any differently from what you do any other committee?

Mr. PAYNE. Not in the slightest.

The ACTING CHAIRMAN. Either as to attorney's fees or guardians' compensation or physicians' compensation?

Mr. PAYNE. No, sir. I may say in regard to the physicians' compensation that a ten-dollar fee is the minimum fee, by long practice in the courts, for an examination of one person by one physician; and usually the court requires two physicians to examine them. In some cases I have cut the allowance to the physicians down, and the court has restored it. Mr. Fenning knows of one such case himself.

The ACTING CHAIRMAN. Is there any distinction in your court and under your own practice between cases that come from the hospital and any other cases?

Mr. PAYNE. There has been; yes.

The ACTING CHAIRMAN. What is that distinction?

Mr. PAYNE. Sometimes I have cases in which the petition filed for an adjudication of lunacy engenders a very great deal of discussion in the court. Physicians are kept on the stand for examination for days. I have one such case in mind now—the case of Eugene Peters, a man who is very well off, and over whose adjudication of lunacy there was a great deal of that sort of thing. In that case the physicians were allowed very much larger fees than any I have named, and it was done without objection by anybody interested in the estate, by counsel representing the lunatic, his wife, and the various parties interested in the estate, directly or indirectly. In that case a very large allowance was made, as I recollect it, to the physicians by me.

The ACTING CHAIRMAN. And you follow the established rule—a rule that has grown up by custom?

Mr. PAYNE. That is, in the class of cases to which I refer—where there is no particular controversy.

The ACTING CHAIRMAN. There is nothing, either by rule of the court or anything of that kind that discriminates in favor of the physicians from the asylum who testify as against other physicians, is there?

Mr. PAYNE. Not at all.

The ACTING CHAIRMAN. Do you grade their fees the same as you do the fees of other testifying physicians?

Mr. PAYNE. Yes, sir; as I said a little while ago, I think there are very few exceptions to the rates allowed them, being \$10 for an examination. That is almost the standard.

The ACTING CHAIRMAN. How is it as to court costs?

Mr. PAYNE. Those are fixed by rule. You mean the court costs, such as clerk's fees?

The ACTING CHAIRMAN. Yes.

Mr. PAYNE. And taking depositions and things of that kind? They are fixed by rules of the court.

The ACTING CHAIRMAN. You do not edge up a little on them in these cases out here where there is an old soldier with money in sight, do you?

Mr. PAYNE. They do not usually have much testimony to take in those cases; that testimony is taken nowadays stenographically, and the rules of the United States Federal courts govern in our court.

The ACTING CHAIRMAN. How is it as to fees?

Mr. PAYNE. There is a fee of 20 or 25 cents a folio to the examiner who takes the testimony. In my office, as auditor, I have my stenographer and take a great deal of testimony in other cases. I may say that a very large part of the work that comes to me is that of a master in chancery. I have cases from all branches of the court. I took a recess in a case down there to come up here. That case involves simply a building contract. It comes from the law side of the court. I am taking testimony in that case and hearing witnesses. All that is governed, as I say, by the rules of the court.

The ACTING CHAIRMAN. About how many cases are there in which Mr. Fenning is committee?

Mr. PAYNE. Well, I couldn't tell you, sir.

The ACTING CHAIRMAN. A good many?

Mr. PAYNE. I should say he has more than any other person who comes before me as committee.

The ACTING CHAIRMAN. Do you know how that happens?

Mr. PAYNE. I do not.

The ACTING CHAIRMAN. Up to this time, in the discharge of his duty as committee, what have you discovered by way of irregularity, if anything?

Mr. PAYNE. Not anything at all. Mr. Fenning's accounts are very well kept. All of his claims of credit for expenditures are accounted for by vouchers in proper form, and his cases evidence a great deal of care for the estate, and a great deal of care for the lunatic, and attention to his wants, and providing him with a necessary outfit and clothing. He has some cases outside of St. Elizabeth's, where he has removed the patient at the request of the family or for other purposes, such as the comfort and convenience of the family. In all cases I have found his accounts in perfect shape. The allowance of commissions to the guardian, as I have said before, varies generally from 5 to 10 per cent of the receipts. Mr. Fenning has, in a great many cases, collected money belonging to the lunatic, or to which he was entitled, and I take that into consideration when I come to fix his commission in the particular case.

The ACTING CHAIRMAN. In other words, you regard that as a rendition of services beneficial to the estate, and you make compensation accordingly?

Mr. PAYNE. Undoubtedly. He avoids, in such cases, the employment of a special attorney to collect that money, or to secure it, and it is one of the elements, or one of the ingredients, of his service for which he should be compensated.

The ACTING CHAIRMAN. Oh, you mean that instead of employing counsel, who might be allowed a separate fee, he does that work and you make an increased allowance to him as committee?

Mr. PAYNE. I take that into account in making his allowance.

Mr. HAY. Is there any rule of law, Mr. Payne, which authorizes you to take a thing of that kind into account?

Mr. PAYNE. No; it is a circumstance in the case.

Mr. HAY. Is there any rule of law, or any rule of the court, fixing the compensation, or the per cent, of the guardian?

Mr. PAYNE. No, sir; I have just said that while there is no rule on that subject, the practice has grown up in the court, which is almost tantamount to a rule, that not less than 5 nor more than 10 per cent should be allowed.

Mr. HAY. Is 10 per cent as high as is allowed in any case?

Mr. PAYNE. Yes, sir.

Mr. HAY. Would you regard a percentage of more than 10 per cent as being more than ought to be allowed in any case?

Mr. PAYNE. As purely commission I should never make allowance to that amount—beyond 10 per cent.

Mr. HAY. Have you ever, in any case in which Mr. Fenning or anybody else was interested, allowed more than 10 per cent?

Mr. PAYNE. I do not think I have. I think I may say very positively that I have not.

Mr. HAY. You have said that there were some cases that did not go before you.

Mr. PAYNE. Yes.

Mr. HAY. Cases where the guardian made his report directly to the court?

Mr. PAYNE. Well, in the case of some guardians or committees, as we call them, they always do that. Mr. Fenning always does it. He files his account with the court first, and then the court sends it to me.

Mr. HAY. I understood you to say there were some cases that did not come before you at all?

Mr. PAYNE. Yes.

Mr. HAY. What are those cases? What character of cases?

Mr. PAYNE. I can hardly give you any—

Mr. HAY. Are they cases in which small sums are involved?

Mr. PAYNE. It may be the smallness of the sum or it may be the shortness of the service of the committee. Perhaps he has not made any change in the fund from the time he first received it, and there have been no expenditures, perhaps.

Mr. HAY. Do you know of any case of that sort in which Mr. Fenning is guardian which has not been referred to you?

Mr. PAYNE. I would not know that.

Mr. HAY. If it was a case in which Mr. Fenning charged \$15 on an estate amounting to \$77.51, that would be a case that could not have come before you?

Mr. PAYNE. I have had no such case before me. That allowance must have been made by the court.

The ACTING CHAIRMAN. Mr. Payne, would you, as auditor, approve an allowance that was excessive?

Mr. PAYNE. I certainly would not. I believe my reputation at the bar is in the contrary direction.

The ACTING CHAIRMAN. Oh, you have the reputation, have you, of chiseling the other way. Is that it?

Mr. PAYNE. I believe I have.

The ACTING CHAIRMAN. I asked you that question because a witness here made some observation about you in that regard. You would exercise your judgment and endeavor to be honest in that exercise, would you not?

Mr. PAYNE. I certainly would. I have already referred to the case of a physician who presented his bill. It came before me and I cut it in two. I think Mr. Fenning knew something of that case. I am not sure he was committee in it, but it was taken before the court, who restored the charge of the physician, and that has occurred more than once with me. The court has increased my allowance of commissions in several cases, not only in lunacy cases, but in cases of trusteeship, of which I have a great many.

The ACTING CHAIRMAN. Has the converse of that proposition been true, that the court has cut down fees that you have fixed?

Mr. PAYNE. I do not know of a single instance of that kind.

The ACTING CHAIRMAN. So the court is more liberal than you are?

Mr. PAYNE. Yes, sir. I allowed a trustee once 3 per cent on his sales of real estate, and the court raised it to 10. That was a very good judge, too, Judge Cox.

The ACTING CHAIRMAN. What is Mr. Fenning's standing at the bar here, if you know?

Mr. PAYNE. It is the best, sir, as far as I know. I have never heard any suggestion or intimation to the contrary. I have known Mr. Fenning for a few years now, and I believe that I know all about the bar. I come in contact with most all of them continually. I never heard Mr. Fenning spoken of in any other terms than excellent.

#### TESTIMONY OF JAMES L. DAVENPORT.

JAMES L. DAVENPORT, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your position, Mr. Davenport?

Mr. DAVENPORT. I am the First Deputy Commissioner of Pensions.

The ACTING CHAIRMAN. How long have you been such?

Mr. DAVENPORT. For nine years.

The ACTING CHAIRMAN. Are you familiar with the pensioners over at St. Elizabeth's Hospital?

Mr. DAVENPORT. Well, I know there are a great many there; but I can not say that I am familiar with them. I am familiar with their claims.

The ACTING CHAIRMAN. Do you know about how many there are over there?

Mr. DAVENPORT. No; I can not tell exactly. I should say 500.

The ACTING CHAIRMAN. Being familiar with their claims, briefly tell us how the payment of their pensions over there is managed, to whom paid, and how disbursed, if you know—if that is a part of your duty.

Mr. DAVENPORT. I am afraid you are going to catch me a little bit on the law. I think the law was passed February 20, 1905, which changed the whole payments. I may be wrong in the date. From that date the payments have been made to the superintendent of the asylum if there are no dependents. If there are dependents, and they have guardians, the pension is paid to the guardian. I believe I am right about that. I do not know for certain.

The ACTING CHAIRMAN. The certificates go to the superintendent?

Mr. DAVENPORT. Oh, no. The certificates go to the pension agent and the check goes to the superintendent.

The ACTING CHAIRMAN. Do you maintain a branch over there in the hospital? Do you have an officer in charge—a pension agent?

Mr. DAVENPORT. No, sir; the way our pensions are paid is this: We do not pay any pensions at the Pension Bureau. There are 18 pension agents. We settle the claim in the Pension Bureau and then the certificate is sent to the pension agent and he pays it. He could tell you more about the payments than I could, because that is beyond us, Mr. Chairman.

Mr. HAY. You have no clerk over at the hospital?

Mr. DAVENPORT. No, sir.

The ACTING CHAIRMAN. So far as your Office is concerned, these pensions go out in the ordinary way?

Mr. DAVENPORT. Always.

The ACTING CHAIRMAN. And your Office has no further connection with them?

Mr. DAVENPORT. We determine, before they leave the Bureau, who they are to be paid to. That has to be placed on the certificate. If it is the guardian, we say "Pay to the guardian."

The ACTING CHAIRMAN. How do you determine that?

Mr. DAVENPORT. By the papers in the case. The guardianship papers are on file with us.

Mr. HAY. When you use the word "guardian" do you mean that to apply to the old soldier himself or to his children?

Mr. DAVENPORT. The old soldier in the ward, and the guardian, or the committee—in some States it is the committee, Mr. Hay; we use the word "guardian" or the word "committee," as the case may be.

The ACTING CHAIRMAN. Do you know Mr. Fenning?

Mr. DAVENPORT. Yes, sir.

The ACTING CHAIRMAN. How long have you known him?

Mr. DAVENPORT. I should think about fifteen years, or perhaps twenty.

The ACTING CHAIRMAN. Was he ever employed in the pension service?

Mr. DAVENPORT. He was employed in the pension agency.

The ACTING CHAIRMAN. Here in the city?

Mr. DAVENPORT. Yes, sir.

The ACTING CHAIRMAN. Do you know of his being committee for a goodly number of old soldiers over here at St. Elizabeth's?

Mr. DAVENPORT. I do.

The ACTING CHAIRMAN. What do you know about the manner of his handling the business committed to him, in that capacity?

Mr. DAVENPORT. He has handled it well, as far as I know. We have had no fault to find with him.

The ACTING CHAIRMAN. Does your Office over there also keep a sort of lookout that the old soldier is treated fairly?

Mr. DAVENPORT. We try to.

The ACTING CHAIRMAN. What do you know, if anything, about Mr. Fenning being committee through any collusion or connivance with anybody?

Mr. DAVENPORT. I do not think that would be possible. I do not see how it could be done. We inspect the papers as they come to us—the guardianship papers that come through the courts. I do not see how there could be any connivance.

The ACTING CHAIRMAN. And so far as your Office is concerned, how is he, by way of looking after the interests of his wards?

Mr. DAVENPORT. He looks after them well, as far as we know. We have had no fault to find with him at all. I can say this: Mr. Fenning was one of our trusted clerks, before he left. He left the service voluntarily.

The ACTING CHAIRMAN. There was a case of an old soldier that has been somewhat exploited here in the last few weeks or months, a man by the name of Kulcke, or some such name. Have you that case in mind?

Mr. DAVENPORT. I have it very firmly in mind.

The ACTING CHAIRMAN. Who is he, and where is he?

Mr. DAVENPORT. He is now at the Soldiers' Home at Napa, Cal., I suppose. I have this communication, that I found on my desk this morning [exhibiting letter]. It will give you a little idea as to whether the man is sane or insane. He has sent me, before this, at different times, \$35 in gold, which I have been at the expense of getting turned into postal notes and sending it back to him. In this communication, which I just received this morning, I have a check here from the Treasury—a deposit receipt of \$50, and a bank book made out in California. It seems to be his personal effects. In this bank book he has a deposit of \$110 deposited last December.

The ACTING CHAIRMAN. How do you come to get these things?

Mr. DAVENPORT. Simply because I have corresponded with him with respect to his pension claim, and he has got my name in that way, and he is sending me papers and this money to me. He has also sent to some one in the secretary's office \$5 in gold, and they have been trying to find out where he is to get it back to him.

Mr. HAY. What does he send it for?

Mr. DAVENPORT. I don't know.

Mr. HAY. What is the reason he sends the money?

Mr. DAVENPORT. I have this letter here. It is too long to try to find out. I have one at the office that is 42 pages long. I have another letter.

The ACTING CHAIRMAN. Was he ever an inmate over at St. Elizabeth's?

Mr. DAVENPORT. I understand he was.

The ACTING CHAIRMAN. Do you know how he happened to get away from there?

Mr. DAVENPORT. I only know, by what I have seen in the papers, that he was taken out on a writ of habeas corpus.

The ACTING CHAIRMAN. And you are in correspondence with him now from California?

Mr. DAVENPORT. Well, the correspondence is all one way up to this time. I am going to start it the other way very quickly, to try and get these papers back to him.

The ACTING CHAIRMAN. The man has no guardian that you know of?

Mr. DAVENPORT. None that I am aware of.

The ACTING CHAIRMAN. Is that the reason you are going to return the papers to him?

Mr. DAVENPORT. I am going to return these and see that he gets them. I am going to send them to a special examiner of ours in San Francisco and get him to take them to the man personally, because I do not know of any other way to get them to him. I have not read that letter, and I do not know what is in it.

#### TESTIMONY OF MRS. E. H. DADDYSMAN.

Mrs. E. H. DADDYSMAN, having been duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mrs. DADDYSMAN. Mrs. E. H. Daddysman.

The ACTING CHAIRMAN. You have a son over in the hospital?

Mrs. DADDYSMAN. I did have a son there.

The ACTING CHAIRMAN. When did he leave there?

Mrs. DADDYSMAN. He has been away from there about six or eight months, I suppose.

The ACTING CHAIRMAN. Do you know a Mr. Hogan?

Mrs. DADDYSMAN. No, sir; I was not acquainted with him.

The ACTING CHAIRMAN. How frequently did you visit your son?

Mrs. DADDYSMAN. I visited him, I reckon, about 12 or 14 times while he was there.

The ACTING CHAIRMAN. How long was he there?

Mrs. DADDYSMAN. He was there going on over a year, I suppose, altogether. He was there twice.

The ACTING CHAIRMAN. How long would your visit be when you would go there?

Mrs. DADDYSMAN. Well, I would stay about three or four hours at a time.

The ACTING CHAIRMAN. How was he, and where was he?

Mrs. DADDYSMAN. There was something wrong with him nearly every time I went, and he was afraid to tell me what was the matter with him. I went over there once, and his eye was all black, and his hand was all cut and bruised, and he was so he could hardly talk.

The ACTING CHAIRMAN. What ward was he on?

Mrs. DADDYSMAN. I don't know, sir, what ward he was on.

The ACTING CHAIRMAN. Did you talk to any of the attendants as to how he happened to get black eyes?

Mrs. DADDYSMAN. No, sir; there was none around where I was. He was in a room to himself. That was the only place I was allowed in, where he was at.

The ACTING CHAIRMAN. So that you got no information as to how this happened?

Mrs. DADDYSMAN. No, sir; only he said he was hurt, and he didn't tell me until he got out. He said that he was afraid that if he told me they would punish him for it.

The ACTING CHAIRMAN. Did he not give you any names?

Mrs. DADDYSMAN. Yes, sir; he gave me names, but I have forgotten them. I think Mr. Hogan was one. I forget the other man's name that hurt him. They choked him and kicked him, and he said he was in bed for about a week. I was over there the day he was out of bed, and he was bruised up pretty bad.

Mr. HAY. Did you ever see him in bed?

Mrs. DADDYSMAN. No, sir; I wasn't over there. He said he had just got out of bed the day I went over there.

The ACTING CHAIRMAN. Did you ever talk with the doctor about it?

Mrs. DADDYSMAN. I was not where the doctor was.

The ACTING CHAIRMAN. Why did you not go to where the doctor was, if he did not come to where you were? Why did you not do that?

Mrs. DADDYSMAN. Well, my son said while he was in bed the doctor came to see him and he said, "Oh, I reckon you are getting all right."

The ACTING CHAIRMAN. Well, I know; but you went there and saw your son in such a condition, and from what you got from him you believed, did you not, that he had been improperly treated?

Mrs. DADDYSMAN. Oh, yes, sir.

The ACTING CHAIRMAN. Now, believing that, why did you not go to see the doctor or some one in charge there?

Mrs. DADDYSMAN. Well, of course I ought to have done it, but of course I wasn't acquainted with none of them and I didn't like to push myself.

The ACTING CHAIRMAN. Is your son an epileptic, or was he?

Mrs. DADDYSMAN. Yes, sir; his mind was a little affected, but he wasn't afflicted very much. He soon got over his affliction.

The ACTING CHAIRMAN. During his afflictions, would he fall at times?

Mrs. DADDYSMAN. No, sir; he would just get crying spells. He wouldn't fall at all. Just melancholy spells he would get.

#### ADDITIONAL TESTIMONY OF MISS MARY L. EDWARDS.

Miss MARY L. EDWARDS, who had heretofore been sworn, was recalled and testified as follows:

The ACTING CHAIRMAN. Miss Edwards, do you know Miss Thorne?

Miss EDWARDS. Yes, sir.

The ACTING CHAIRMAN. Is she an attendant over there?

Miss EDWARDS. Yes, sir; she is a nurse.

The ACTING CHAIRMAN. Do you know a Miss Hotchkiss, who testified here?

Miss EDWARDS. No, sir; she is not on my ward at all. I do not know anything of her.

Mr. HAY. There are two ladies by the name of Edwards there, are there not?



Miss EDWARDS. Yes, sir; my sister and I.

The ACTING CHAIRMAN. Do you know anything about a Miss Hotchkiss that is over there in the hospital?

Miss EDWARDS. I know of her, but I don't know her at all. I have never been on the ward with her and know nothing of her.

The ACTING CHAIRMAN. You have a sister over there?

Miss EDWARDS. Yes, sir; it is my sister.

The ACTING CHAIRMAN. You do not know anything of the treatment of Miss Hotchkiss, a patient over there?

Miss EDWARDS. No, sir; I do not know anything about that at all.

The ACTING CHAIRMAN. That must be your sister.

Miss EDWARDS. Yes, sir; it was my sister, I guess.

The ACTING CHAIRMAN. You have not anything additional to say, in addition to what you said when you were here before, have you?

Miss EDWARDS. No indeed.

#### TESTIMONY OF MISS L. S. THORNE.

Miss L. S. THORNE, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. Are you an employee over at the hospital?

Miss THORNE. I am.

The ACTING CHAIRMAN. What is your position?

Miss THORNE. I am a nurse.

The ACTING CHAIRMAN. On what ward?

Miss THORNE. On Oaks A 1 and 2, at present.

The ACTING CHAIRMAN. Do you know Miss Hotchkiss, a lady over there?

Miss THORNE. Yes, sir; very well.

The ACTING CHAIRMAN. How has she been treated, do you know?

Miss THORNE. Very well, so far as I know.

The ACTING CHAIRMAN. Do you know her sister, who comes there to visit her?

Miss THORNE. Yes, sir.

The ACTING CHAIRMAN. How long have you known her?

Miss THORNE. I have known her about four years, I should say—not very well, though, until June of last year. I never knew her; I just knew her when I saw her. After that time I used to see her when she visited her sister.

The ACTING CHAIRMAN. What about you and Miss Edwards? Do you know Miss Edwards?

Miss THORNE. Yes, sir.

The ACTING CHAIRMAN. What about you and Miss Edwards assaulting the patient, Miss Hotchkiss?

Miss THORNE. Well, I know that I never assaulted her, and I am sure Miss Edwards never did.

The ACTING CHAIRMAN. Did any such thing occur?

Miss THORNE. No, sir.

The ACTING CHAIRMAN. Did you ever see any such thing happen?

Miss THORNE. No, sir; nothing like that could happen without my knowledge, as I had charge of the ward and of Miss Hotchkiss at that time.

The ACTING CHAIRMAN. Did you ever hear of her being assaulted over there?

Miss THORNE. Yes, sir; I understand that I am accused, or have been accused, of such.

The ACTING CHAIRMAN. You say you never did it?

Miss THORNE. No, sir; I certainly did not.

The ACTING CHAIRMAN. Have you heard of her being assaulted by anybody else?

Miss THORNE. No, sir; but it does not look reasonable that I could, if you knew the patient and knew her character.

The ACTING CHAIRMAN. Why?

Miss THORNE. Because when she was removed from under my care it required a policeman and other help, a man that was working on the grounds, to remove her from one ward to the other—from K building to the Q building.

The ACTING CHAIRMAN. What sized woman is she?

Miss THORNE. I should say about 5 feet 10 inches in height.

The ACTING CHAIRMAN. And she weighs about how much?

Miss THORNE. She weighs about 160, I judge; probably more than that when she is—sometimes she is stouter than she is at other times.

The ACTING CHAIRMAN. She is a strong woman, is she?

Miss THORNE. Very, very strong.

The ACTING CHAIRMAN. You say no such thing happened?

Miss THORNE. No, sir; I never had any trouble of that kind. I never attempted it, because I wouldn't do it. I wouldn't think of such a thing. I wouldn't attack her alone, or even with another nurse.

The ACTING CHAIRMAN. How do you treat your patients?

Miss THORNE. I treat my patients the very, very best I can. In no way do I neglect them, or have I in five years and a half service there.

The ACTING CHAIRMAN. What sort of treatment do you require of the attendants under you?

Miss THORNE. The very best. They have to do as I do.

Mr. HAY. Miss Thorne, after this trouble was had with Miss Hotchkiss did Doctor Clark make an investigation?

Miss THORNE. He certainly did question me about it.

Mr. HAY. Were you then transferred from that ward?

Miss THORNE. I was, sir.

#### TESTIMONY OF MISS MARGARET BOND.

Miss MARGARET BOND, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. You are employed over at St. Elizabeth's?

Miss BOND. Yes, sir.

The ACTING CHAIRMAN. What is your capacity over there?

Miss BOND. The capacity of the ward, you mean?

The ACTING CHAIRMAN. No; what is your particular duty?

Miss BOND. My duty at the present time is that of an attendant.

The ACTING CHAIRMAN. On what ward?

Miss BOND. On Q 4.

The ACTING CHAIRMAN. Did you know Mrs. Wright?

Miss BOND. No; I did not. I think you are mistaken in the name. There was a girl that worked at the hospital by the same name, who has left. My name is Margaret.

The ACTING CHAIRMAN. Margaret?

Miss BOND. Yes, sir.

The ACTING CHAIRMAN. Marion is the name I have here. Was Mrs. Wright ever under your care?

Miss BOND. No; I have never worked with anything only colored patients since I have been an attendant. For six years and nine months I have worked for the physicians, and the balance of the time I have worked with the colored patients.

The ACTING CHAIRMAN. Then you are the wrong lady. Do you know where Marian Bond is?

Miss BOND. No, sir; I do not.

Mr. HAY. Was she at the hospital?

Miss BOND. Yes; she was at the hospital. She has resigned from the hospital, I think, about three months ago.

#### TESTIMONY OF PATRICK BARRETT.

PATRICK BARRETT, having been duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. BARRETT. Pat Barrett, sir.

The ACTING CHAIRMAN. Are you connected with the hospital?

Mr. BARRETT. Yes, sir.

The ACTING CHAIRMAN. In what capacity?

Mr. BARRETT. I am night watchman at present, sir.

The ACTING CHAIRMAN. How long have you been such?

Mr. BARRETT. I went to the hospital on the 2d of March, 1877, sir. I was three years and a little better an attendant, and I was night watch about the 12th of March, 1880, and I am still night watch. I always had dealing with the patients the whole time that I am there.

The ACTING CHAIRMAN. Did you know a Mr. Henry Spencer?

Mr. BARRETT. No, sir.

The ACTING CHAIRMAN. Did you know his wife, Mabel Spencer?

Mr. BARRETT. I heard of her, sir.

The ACTING CHAIRMAN. Did you know her?

Mr. BARRETT. I knew her. I didn't know just who she was for a long time, sir. I never knew her name, personally, until I was told about her.

The ACTING CHAIRMAN. Well, let us get right at it. I suppose you do not know, really, what you are here for, do you?

Mr. BARRETT. No, sir.

The ACTING CHAIRMAN. Do you know that Mrs. Mabel Spencer charged you with having committed an assault on her?

Mr. BARRETT. She reported that, sir.

The ACTING CHAIRMAN. What about it?

Mr. BARRETT. I don't know anything about it, sir, but just merely that it was not so.

The ACTING CHAIRMAN. What foundation was there for her making such a charge against you?

Mr. BARRETT. I couldn't tell you, sir.

The ACTING CHAIRMAN. Have you no idea?

Mr. BARRETT. No, sir.

The ACTING CHAIRMAN. Did you see her on the grounds at night?

Mr. BARRETT. No, sir; I never saw her there at night.

The ACTING CHAIRMAN. Was there any improper conduct at any time?

Mr. BARRETT. No, sir.

The ACTING CHAIRMAN. When I say "night" I mean from dark to dark. Did you see her early in the morning?

Mr. BARRETT. I have seen her about 6 o'clock, coming in there in the morning.

The ACTING CHAIRMAN. Any earlier than that?

Mr. BARRETT. No, sir.

The ACTING CHAIRMAN. Was there ever anything improper between you and Mabel Spencer?

Mr. BARRETT. No, sir; never; nor anybody else over there.

The ACTING CHAIRMAN. Well, you were called up and investigated for that, were you not?

Mr. BARRETT. Yes, sir; I was suspended for it.

The ACTING CHAIRMAN. Suspended?

Mr. BARRETT. Yes, sir.

The ACTING CHAIRMAN. How long?

Mr. BARRETT. From the 26th of August until the 9th of October—last August and October.

The ACTING CHAIRMAN. Nearly two months. Was there any foundation for that?

Mr. BARRETT. No, sir; none whatever. It was just an outrage.

The ACTING CHAIRMAN. How old are you?

Mr. BARRETT. I am 56 years of age.

The ACTING CHAIRMAN. Are you married?

Mr. BARRETT. No, sir.

Mr. HAY. What is your duty out there now?

Mr. BARRETT. I am night watch.

Mr. HAY. The same duty you had before?

Mr. BARRETT. Since March, 1880, sir.

The ACTING CHAIRMAN. Say, Mr. Barrett, did you ever see Maenche come in there drunk at night?

Mr. BARRETT. I have met him coming in, sir. I might be satisfied myself that he might be drinking, but I couldn't swear that I ever saw him drunk. I have met him very often.

The ACTING CHAIRMAN. Did he require any assistance? Was he able to take care of himself?

Mr. BARRETT. Oh, if he wasn't able to take care of himself I would know that he would be drunk.

The ACTING CHAIRMAN. Did you ever see him when he was not able to take care of himself?

Mr. BARRETT. I never saw him when he was not able to take care of himself.

The ACTING CHAIRMAN. Where would he go—to his quarters?

Mr. BARRETT. I expect so, sir.

The ACTING CHAIRMAN. Were you ever, as night watchman, called on there to look after Maenche, owing to his condition?

Mr. BARRETT. No, sir; I have never been.

The ACTING CHAIRMAN. You put a little emphasis on the "I." Do you mean by that that somebody else has?

Mr. BARRETT. I don't know, sir, about anybody else. I have met him very often, sir, coming in.

Mr. WALLACE. When you were suspended, or supposed to have been suspended, where were you during your suspension?

Mr. BARRETT. I was waiting to hear from the superintendent.

Mr. WALLACE. I mean where were you staying?

Mr. BARRETT. I was staying at the hospital.

Mr. WALLACE. Were you in a ward there?

Mr. BARRETT. I used to take a meal there every day.

Mr. WALLACE. That is where you lived and got your sustenance?

Mr. BARRETT. No, sir; I had my room and I used to take a meal at the ward every day.

Mr. WALLACE. You were still on the ground?

Mr. BARRETT. Yes, sir; the superintendent told me he would let me know in a day or two, and would have it investigated, and I was during that time suspended, sir. I went to see him the evening I was suspended and I didn't find him. It was Saturday, and Sunday morning I went to see him over at the administration building and he was not there at the time. I was told he was in B building and I waited for him until he came back. He told me he couldn't see me then, that he had to see a patient. That was Sunday morning, the 27th of August. I went there Monday morning and met this woman there for the first time. That was the first time I ever knew her name.

Mr. WALLACE. When were you restored to your position?

Mr. BARRETT. The 9th of October.

Mr. WALLACE. How long were you suspended then?

Mr. BARRETT. From the 26th of August, sir.

The ACTING CHAIRMAN. You say you take one meal a day where?

Mr. BARRETT. I was in Maple Ward when I was suspended, sir.

The ACTING CHAIRMAN. Where do you eat now?

Mr. BARRETT. Oh, I eat at different places; there is a general diet room.

The ACTING CHAIRMAN. Do you eat at the hospital?

Mr. BARRETT. All the time pretty much.

The ACTING CHAIRMAN. What meals do you take there?

Mr. BARRETT. Two meals in the general dining room and one in the attendants' dining room at 5 o'clock; and I take a meal at 12 o'clock at night.

The ACTING CHAIRMAN. What sort of grub do you have over there?

Mr. BARRETT. The grub is fairly good; I don't see any change for the past twenty-six years. It is just as good now as it was twenty years past, where I am taking my meals.

The ACTING CHAIRMAN. Has it improved any?

Mr. BARRETT. Not that I know of; the meals are about the same.

The ACTING CHAIRMAN. You have sort of grown used to it, have you?

Mr. BARRETT. Yes, sir.

The ACTING CHAIRMAN. Did you ever have spoiled meat over there?

Mr. BARRETT. I never saw any, sir.

The ACTING CHAIRMAN. Did you ever see any there in any of the dining rooms where the meat was so bad that they had to spit it out?

Mr. BARRETT. Never, sir.

**TESTIMONY OF CLARENCE T. CARTER.**

CLARENCE T. CARTER, having been duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. CARTER. Clarence T. Carter.

The ACTING CHAIRMAN. Do you know Mrs. Roland?

Mr. CARTER. Yes, sir; I know one Mrs. Roland.

The ACTING CHAIRMAN. Did she not have a son over there?

Mr. CARTER. Yes, sir; this one had.

The ACTING CHAIRMAN. What was his name? Do you know his first name?

Mr. CARTER. It is some time since the patient was in our department. I think it was William H. I won't be positive.

The ACTING CHAIRMAN. Say, along in September or August of last year, was he in your ward?

Mr. CARTER. No, sir.

The ACTING CHAIRMAN. Did you ever see him with a cut over his eye?

Mr. CARTER. I saw him with a blackened eye. I don't think there was any cut—

The ACTING CHAIRMAN. When was that?

Mr. CARTER. I couldn't say just when. He was transferred from that department in September, 1904. This was a very short while before he was transferred to the other department. I would say it was about August or perhaps the 1st of September.

The ACTING CHAIRMAN. Did you ever talk with Mrs. Roland about that time?

Mr. CARTER. Yes, sir.

The ACTING CHAIRMAN. When and where?

Mr. CARTER. They took the boy over to the hospital ward for Doctor Hummer to look at his eye, and it was not anything serious, but it was considerably blackened; and the doctor said he guessed I had better drive over to tell his mother he had received this lick; that while it was not anything that would hurt him very much, he thought that if she came and found it she would think we had not done as well as we might, and that we should have notified her. I drove over and told her about it.

The ACTING CHAIRMAN. You gave her the information?

Mr. CARTER. Yes.

The ACTING CHAIRMAN. How did he get the black eye?

Mr. CARTER. He was a patient who was pretty free at striking other patients. He did it very often, and he was generally pretty careful about the man he would pick out, but I guess he ran across the wrong one. He was down in the toilet room with a patient by the name of Dennis Cummings, who was a very quiet fellow who never bothered anybody else, but who would not stand for much from others. It has always been my opinion that he started it, because Cummings was a quiet man. The attendants found him with this eye, and I asked Cummings about it, and he said he did it.

The ACTING CHAIRMAN. Cummings was a patient?

Mr. CARTER. Yes, sir.

The ACTING CHAIRMAN. That is the origin and the history, you think, of that black eye?

Mr. CARTER. I do not think there is any doubt about it. The other patient said he struck him. Cummings acknowledged that he struck him.

The ACTING CHAIRMAN. What did Roland say? Did he say Cummings struck him?

Mr. CARTER. He would not talk much to you about it. There were times when he didn't seem to know anything; he didn't know enough to tell you anything. If you would ask him something he would curse you and walk off.

The ACTING CHAIRMAN. Did that black eye come from attendants?

Mr. CARTER. No, sir; it did not.

The ACTING CHAIRMAN. How were the patients treated over there?

Mr. CARTER. They were treated about as well as they could possibly be, I think, sir.

The ACTING CHAIRMAN. Is there any cruelty that you know of?

Mr. CARTER. There are two or three cases that I have known of.

The ACTING CHAIRMAN. What were they and who were they?

Mr. CARTER. One was a patient by the name of Frank Cullen.

The ACTING CHAIRMAN. What was that?

Mr. CARTER. An attendant by the name of Acton, it is supposed, struck him with a piece of garden hose, a short piece that was used on the ward in drawing water from the spigot into buckets, in drawing hot water. I guess it was a case of the man losing his head and doing it without any cause whatever. The patient was a little noisy sometimes, and he would walk the floor and yell a little, but I don't think there was any danger of him bothering anybody. I never knew him to tackle anyone.

The ACTING CHAIRMAN. What became of that attendant?

Mr. CARTER. The superintendent, Doctor White, was away at the time. He was suspended from duty and his keys were taken from him to await Doctor White's return. When he returned he came over and investigated the matter himself. The only evidence we had was that of several other patients on the ward, and I think he had Doctor Hummer go out and swear out a warrant for him. But the fellow had skipped the jurisdiction of the District. He had gone down into Maryland somewhere and they never got him. That is the last I ever heard of him.

The ACTING CHAIRMAN. He is not over there now?

Mr. CARTER. No, sir; he has not been there since.

The ACTING CHAIRMAN. What other case do you know of?

Mr. CARTER. Another case was the case of a German by the name of—

The ACTING CHAIRMAN. Well, if you can not recall the name, let it go.

Mr. CARTER. The attendant's name was Barnes. I know his name well enough. The patient came to Supervisor Toner and reported to the supervisor that Barnes had struck him as he came down the landing. He had a black eye, and it showed that somebody had struck him. Mr. Toner, I believe, questioned Barnes about it, and told him he would report him, and that he guessed he might about as well pack up; but he didn't wait to be notified any further. It was reported, and before the doctor got over there he had gone. He had turned in his keys to another attendant and left the hospital, and we have not seen him since.

The ACTING CHAIRMAN. He had—what do they call it, skidoed?  
Mr. CARTER. Yes; I guess he thought he was No. 23.

The ACTING CHAIRMAN. Generally, what is the treatment of patients there?

Mr. CARTER. They are treated well, I think. The attendants as a general thing are kind and good to them. I have known them a great many times to put themselves out considerably in order to accommodate them in different ways that they were not even required to do. I think they are generally good to them.

Mr. HAY. How long have you been there?

Mr. CARTER. Not quite seven years. About six years and eleven months.

Mr. HAY. What have you to say about the food?

Mr. CARTER. The food is clean, wholesome, and good. Well, I suppose that I have grumbled a little myself sometimes about the meat, not that it is not good meat, but we get some corned beef. I guess it is as good corned beef as you get anywhere, but I never saw a piece of corned beef that was good. I don't like it, and like a good many other things, I don't eat it. Sometimes you would run across corned beef, and maybe at the same meal vegetables that you don't eat, and a fellow will growl a little when he gets up from the table.

Mr. HAY. But as a general thing you think the food is good and wholesome?

Mr. CARTER. As a general thing I think the food is good and wholesome.

Mr. HAY. How many patients are there on your ward?

Mr. CARTER. I am an assistant supervisor, and I look after several wards in that department.

Mr. HAY. Do you think you have a sufficient number of attendants there to take care of the patients properly?

Mr. CARTER. I think we have, sir. We have all we need.

Mr. HAY. What part of the hospital are you in? Who are you under?

Mr. CARTER. I am under Doctor Hummer, in the detached buildings department.

Mr. HAY. That is what you call the bull pen?

Mr. CARTER. Yes, sir; I believe it is so classed by some of the patients.

The ACTING CHAIRMAN. Where are you from?

Mr. CARTER. I am from Loudoun County, Va.

#### TESTIMONY OF T. D. LYON.

T. D. LYON, having been duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. LYON. T. D. Lyon.

The ACTING CHAIRMAN. Are you employed over at the hospital?

Mr. LYON. No, sir; I am not now at the hospital.

The ACTING CHAIRMAN. Were you ever?

Mr. LYON. I was.

The ACTING CHAIRMAN. When?

Mr. LYON. From November 10, 1902, to June 1, 1906.

The ACTING CHAIRMAN. Did you know a Mr. Herbert?



Mr. LYON. Yes, sir; I did now of him. He worked in the laundry. I seen him sometimes when I would go to the laundry.

The ACTING CHAIRMAN. Did you ever see any "toweling" over there?

Mr. LYON. No, sir; I did not.

The ACTING CHAIRMAN. Did you ever do any yourself?

Mr. LYON. No, sir; I did not.

The ACTING CHAIRMAN. What ward did you work in—what building?

Mr. LYON. Different buildings and different wards.

The ACTING CHAIRMAN. And in none of them did you ever see any of this?

Mr. LYON. I worked in different ones.

The ACTING CHAIRMAN. I say in none of these did you ever see any toweling?

Mr. LYON. No, sir.

The ACTING CHAIRMAN. Do you know what it is?

Mr. LYON. Yes, sir; I have seen it in the paper and heard of it.

The ACTING CHAIRMAN. Outside of the paper, what is it?

Mr. LYON. I suppose it is what it is in the paper. They put it around their neck and twist it is all I know. That is what I have heard of it.

The ACTING CHAIRMAN. And is the only knowledge you have of the thing they call toweling, from what you have seen in the paper?

Mr. LYON. That is all.

The ACTING CHAIRMAN. You never saw it in actual practice?

Mr. LYON. No, sir; I did not.

The ACTING CHAIRMAN. You never did it yourself?

Mr. LYON. No, sir.

The ACTING CHAIRMAN. Mr. Herbert says that you are the fellow that did it. Did you ever do that in the presence of this man Herbert, or of anybody else?

Mr. LYON. No, sir.

The ACTING CHAIRMAN. How did you treat your patients?

Mr. LYON. I treated the patients all right when I was there. Mr. Herbert stated that, in the P building I think his statement was, he had seen patients treated badly in the P building in the month of July, 1905—colored patients. There was no colored patients there then. I went to the P building with colored patients on August 20, 1904, and came back on the 14th of October, 1904.

Mr. HAY. What are you doing now?

Mr. LYON. I am in the fire department now.

The ACTING CHAIRMAN. Do you like that better than you did over at the hospital?

Mr. LYON. I should say so; yes, sir—a little better, anyway.

#### TESTIMONY OF EUGENE SKINNER.

EUGENE SKINNER, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. SKINNER. Eugene Skinner.

The ACTING CHAIRMAN. Skinner?

Mr. SKINNER. Yes, sir.

The ACTING CHAIRMAN. Are you connected with the hospital?

Mr. SKINNER. Yes, sir.

The ACTING CHAIRMAN. What do you do over there?

Mr. SKINNER. I work the patients outside.

The ACTING CHAIRMAN. How long have you been there?

Mr. SKINNER. Going on eleven years.

The ACTING CHAIRMAN. Has that been your business all the time?

Mr. SKINNER. No, sir; I worked on the farm when I first went there.

The ACTING CHAIRMAN. How long has it been your duty to take the patients out?

Mr. SKINNER. About five years.

The ACTING CHAIRMAN. When do you take them out?

Mr. SKINNER. In the morning.

The ACTING CHAIRMAN. And in the afternoon, too?

Mr. SKINNER. Yes, sir.

The ACTING CHAIRMAN. What time in the morning?

Mr. SKINNER. At half past 7.

The ACTING CHAIRMAN. How do you treat them?

Mr. SKINNER. I treat them all right.

The ACTING CHAIRMAN. How many do you take out?

Mr. SKINNER. Twelve and fifteen.

The ACTING CHAIRMAN. Does anybody help you, or are you alone?

Mr. SKINNER. I am alone.

The ACTING CHAIRMAN. What sort of patients are they?

Mr. SKINNER. They are all pretty straight—pretty good men.

The ACTING CHAIRMAN. Do you have any trouble with them?

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. Did you ever put your arm around the neck of a patient over there?

Mr. SKINNER. No, sir; not as I know of.

The ACTING CHAIRMAN. And call him "you son of a bitch?"

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. A fellow who was making a noise and who provoked you?

Mr. SKINNER. No, sir; I haven't got that kind of men.

The ACTING CHAIRMAN. Well, are you that kind of a man? That is a thing I want to get at.

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. Did such a thing ever happen?

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. Did you tell him you would make him shut up that noise or you would cut his wind off?

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. And the patient "went down?"

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. Or to quit singing?

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. No such thing ever happened?

Mr. SKINNER. No, sir; not with me.

The ACTING CHAIRMAN. Your name is Eugene Skinner, is it not?

Mr. SKINNER. Yes, sir.

The ACTING CHAIRMAN. And that is not true?

Mr. SKINNER. No, sir; it is not.

The ACTING CHAIRMAN. Did you ever see any such thing?

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. Do you know O'Connor?

Mr. SKINNER. I know of him.

The ACTING CHAIRMAN. Do you know how O'Connor happened to state such a thing as that?

Mr. SKINNER. No, sir; I do not.

The ACTING CHAIRMAN. Patrick O'Connor.

Mr. SKINNER. He worked out around the grounds.

Mr. HAY. He is not there, is he?

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. Was he discharged?

Mr. SKINNER. Yes, sir.

The ACTING CHAIRMAN. What for? Do you know?

Mr. SKINNER. I don't know, sir; something because he wouldn't do what he was told. I don't know what it was.

The ACTING CHAIRMAN. Did you report him?

Mr. SKINNER. No, sir; I had no business reporting him.

The ACTING CHAIRMAN. Can you not give us some idea what made O'Connor come here and tell us that kind of a story on you?

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. It never happened, you say?

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. Have you met other attendants taking patients out for a walk?

Mr. SKINNER. No, sir.

The ACTING CHAIRMAN. But you have seen them out, have you not?

Mr. SKINNER. Oh, yes, sir.

The ACTING CHAIRMAN. How did the other attendants that had them out treat their patients, so far as you observed?

Mr. SKINNER. They treated them all right as far as I know.

The ACTING CHAIRMAN. Did you ever hear any such thing over there as "you son of a bitch," and so on?

Mr. SKINNER. Sometimes.

The ACTING CHAIRMAN. Where would it come from?

Mr. SKINNER. From the patients.

The ACTING CHAIRMAN. Were they the only ones?

Mr. SKINNER. Yes; all I ever heard say it.

The ACTING CHAIRMAN. Oh, I have been on the wrong track. You take the patients out to work? Is that it?

Mr. SKINNER. To work; yes, sir. I do not take them out walking.

The ACTING CHAIRMAN. You walk them first, and then you begin to work them when you get through with the walk?

Mr. SKINNER. Yes.

The ACTING CHAIRMAN. Do you have any trouble with them, to get them to do their work?

Mr. SKINNER. No, sir; they all work along.

The ACTING CHAIRMAN. How old are you?

Mr. SKINNER. I am 26.

The ACTING CHAIRMAN. Are you married?

Mr. SKINNER. Yes, sir.

The ACTING CHAIRMAN. Where do you live?

Mr. SKINNER. At Congress Heights.

The ACTING CHAIRMAN. Do you eat over at the hospital?

Mr. SKINNER. Yes, sir.

The ACTING CHAIRMAN. All your meals?

Mr. SKINNER. Sometimes. Sometimes I eat home.

The ACTING CHAIRMAN. What kind of grub do you get over there?

Mr. SKINNER. The grub is good enough.

The ACTING CHAIRMAN. And is there enough of it?

Mr. SKINNER. Yes, sir. Sometimes the corned beef is not so good.

The ACTING CHAIRMAN. What is the matter with it?

Mr. SKINNER. It is not cooked, sometimes, done enough.

The ACTING CHAIRMAN. Generally, how is the food?

Mr. SKINNER. It is pretty good.

#### TESTIMONY OF C. P. BICKSLER.

C. P. BICKSLER, having been duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. BICKSLER. Charles P. Bicksler.

The ACTING CHAIRMAN. Are you employed over at the hospital?

Mr. BICKSLER. Yes, sir.

The ACTING CHAIRMAN. How long have you been there?

Mr. BICKSLER. I have been there about twenty years.

The ACTING CHAIRMAN. What capacity are you employed in?

Mr. BICKSLER. I am an attendant.

The ACTING CHAIRMAN. Do you know Mr. Connell?

Mr. BICKSLER. Yes, sir; Jeremiah Connell.

The ACTING CHAIRMAN. I don't know whether it is Jeremiah or Sambo.

Mr. BICKSLER. Yes, sir; he is on my ward.

The ACTING CHAIRMAN. His name is Jeremiah A. Connell. Did you have a report from Connell about an assault on Daddysman?

Mr. BICKSLER. Yes, sir; there was an attendant there that had some trouble with him one morning.

The ACTING CHAIRMAN. Who was the attendant?

Mr. BICKSLER. His name was Mr. Wheaton.

The ACTING CHAIRMAN. What was the trouble?

Mr. BICKSLER. I didn't see it. I didn't know just what it was.

The ACTING CHAIRMAN. It was reported to you?

Mr. BICKSLER. Yes, sir. It seems to me as if Mr. Daddysman was in the way, and the attendants were sweeping, and he wouldn't get out of the way, and he pushed him and they had some little trouble over it.

The ACTING CHAIRMAN. Did Connell report it to you?

Mr. BICKSLER. I don't know as he reported it to me. I think the attendant reported it to me.

The ACTING CHAIRMAN. Did Connell come and make a complaint to you about that, and you not answer him?

Mr. BICKSLER. He might have mentioned it. I don't know that he made any report particularly. The attendant reported it to me.

The ACTING CHAIRMAN. Was this in Sycamore Ward?

Mr. BICKSLER. Yes, sir.

The ACTING CHAIRMAN. How do you treat your patients over there?

Mr. BICKSLER. I treat the patients all right. I have a very good class of men, and they don't need any bad treatment.

The ACTING CHAIRMAN. How do the rest of the help around there treat them, as far as you know?

Mr. BICKSLER. As far as I know they are treated all right.

The ACTING CHAIRMAN. Do you eat over there?

Mr. BICKSLER. Yes, sir.

The ACTING CHAIRMAN. How is the food?

Mr. BICKSLER. Well, the food is kind of coarse. It is not so very good sometimes.

The ACTING CHAIRMAN. And better at others, is it?

Mr. BICKSLER. Yes, sir.

Mr. HAY. How many patients are there in your ward?

Mr. BICKSLER. Twenty-one.

Mr. HAY. And how many attendants?

Mr. BICKSLER. Two.

Mr. HAY. Have you sufficient attendants to properly take care of the patients?

Mr. BICKSLER. I think we could do better if we had another attendant. There used to be three on the same ward.

Mr. HAY. You say the patients on your ward are a good class of patients?

Mr. BICKSLER. Yes, sir.

Mr. HAY. Have you any patients who are disturbed?

Mr. BICKSLER. No, sir; they are all pretty quiet patients.

Mr. HAY. Are they in bed?

Mr. BICKSLER. No; they are all up. The greater portion of them have paroles and go out unattended.

Mr. HAY. Why do you need more than two, then?

Mr. BICKSLER. There is a good deal of work to do in connection with the ward, and the attendants have that to do.

Mr. HAY. What have you to say about the fourteen and twelve hours that you have to work?

Mr. BICKSLER. Well, I stated here before that it was long hours to work.

Mr. HAY. You have been on the stand before, have you not?

Mr. BICKSLER. Yes, sir.

#### TESTIMONY OF W. GREENE.

W. GREENE, having been duly sworn, was examined, and testified as follows:

The ACTING CHAIRMAN. What is your name?

Mr. GREENE. W. Greene.

The ACTING CHAIRMAN. Are you out at the hospital?

Mr. GREENE. I am; yes, sir.

The ACTING CHAIRMAN. What is your business out there?

Mr. GREENE. I have charge of one of the criminal wards in the insane department.

The ACTING CHAIRMAN. As supervisor?

Mr. GREENE. No, sir.

The ACTING CHAIRMAN. Attendant?

Mr. GREENE. Head attendant—charge attendant.

The ACTING CHAIRMAN. How long have you been there?

Mr. GREENE. Ten years this July coming.

The ACTING CHAIRMAN. How long have you been in charge of this particular ward?

Mr. GREENE. Three years the 2d day of this month past.

The ACTING CHAIRMAN. Do you know a fellow out there by the name of Browning?

Mr. GREENE. Do I? I certainly do. I am very personally acquainted with him.

The ACTING CHAIRMAN. How about you and Browning?

Mr. GREENE. How about us?

The ACTING CHAIRMAN. Do you go on a little jag occasionally?

Mr. GREENE. Well, now, that is getting personal. [Laughter.]

The ACTING CHAIRMAN. I know it is, and that is the reason I ask.

Mr. GREENE. I think you are getting personal now, Mr. Smyser. Excuse me for making that assertion.

The ACTING CHAIRMAN. Do you and Browning, and have you been in the habit of going out and having a good time?

Mr. GREENE. Well, we go out occasionally to meet our friends and have a social time.

The ACTING CHAIRMAN. How frequently?

Mr. GREENE. Not very often.

The ACTING CHAIRMAN. About how frequently, say, during the last year?

Mr. GREENE. Well, about six months, I presume.

The ACTING CHAIRMAN. What do you drink; beer or whisky?

Mr. GREENE. No, sir; the last time we were invited to a reception we had, of course, port wine. We always drink the very best when we go. [Laughter.]

The ACTING CHAIRMAN. Did that agree with you?

Mr. GREENE. It didn't seem to at this time. I went beyond my capacity, I must say.

The ACTING CHAIRMAN. How was Browning?

Mr. GREENE. He acted all right.

The ACTING CHAIRMAN. How long ago was this port-wine incident?

Mr. GREENE. This past March.

The ACTING CHAIRMAN. The truth of it is that you boys got a little full, did you not?

Mr. GREENE. That was the result; yes, sir.

The ACTING CHAIRMAN. Were you on duty then?

Mr. GREENE. No, sir; we were not. I consider this a personal affair.

The ACTING CHAIRMAN. I know it is——

Mr. GREENE. We did not do anything detrimental to the hospital; do you think so, Mr. Smyser?

The ACTING CHAIRMAN. Perhaps you are right.

Mr. GREENE. But do you think so? [Laughter.]

The ACTING CHAIRMAN. I would not drink port wine.

Mr. GREENE. You would not? Well, every gentleman to his fancy, you know.

The ACTING CHAIRMAN. If you ask me for my advice, if you are going to get full don't get full on port wine.

Mr. GREENE. Well, I will take your advice about it.

The ACTING CHAIRMAN. Now, I want to come back. The truth is that on this occasion you boys did drink too much wine?

Mr. GREENE. I acknowledge that.

The ACTING CHAIRMAN. Was it at night?

Mr. GREENE. It was.

The ACTING CHAIRMAN. About what time did you return to the hospital?

Mr. GREENE. At 12 o'clock; we were due at 12 o'clock and we returned at 12 o'clock.

The ACTING CHAIRMAN. Were you able to get to your rooms?

Mr. GREENE. We certainly were.

The ACTING CHAIRMAN. After a night's sleep were you able to go to work?

Mr. GREENE. We certainly were; we got up the next morning and performed our duties properly.

The ACTING CHAIRMAN. Did that little hurrah interfere with the discharge of your duties?

Mr. GREENE. No, sir; not in the least. It did not incapacitate me in the least. I don't know about Mr. Browning. May I speak a word?

The ACTING CHAIRMAN. Yes.

Mr. GREENE. It is very humiliating to have this brought into converse here; it certainly is. I thought this thing was settled among Doctor White and myself and Mr. Browning, and I think he gave us a sufficient penalty for this.

The ACTING CHAIRMAN. Now, then, I want to ask you, Was that incident reported to Doctor White?

Mr. GREENE. It was; it was carried to Doctor White.

The ACTING CHAIRMAN. Did the doctor ever take you in charge for it?

Mr. GREENE. He did; he certainly did. He had us both before him, and—

The ACTING CHAIRMAN. Right in that connection, did you, like honest boys, tell him what you had done?

Mr. GREENE. I did; I pleaded guilty and begged for mercy. I did certainly.

The ACTING CHAIRMAN. The doctor did not discharge you?

Mr. GREENE. No, sir.

The ACTING CHAIRMAN. You promised to do better?

Mr. GREENE. I certainly did.

The ACTING CHAIRMAN. Have you done better?

Mr. GREENE. I told him it was my first offense.

The ACTING CHAIRMAN. Have you done better?

Mr. GREENE. Oh, I hope so.

The ACTING CHAIRMAN. Well, you know.

Mr. GREENE. Well, I certainly have tried to.

The ACTING CHAIRMAN. How has Browning done?

Mr. GREENE. Elegant, so far as I know.

The ACTING CHAIRMAN. Did he listen to you?

Mr. GREENE. He certainly did, Mr. Smyser.

The ACTING CHAIRMAN. Did Doctor White remind you of rule 2, chapter 3, when he had you up there giving you a going over? Did he tell you that the use of intoxicating drink was strictly prohibited,

and its use in excess at any time, whether on duty or not, was sufficient cause for dismissal?

Mr. GREENE. He did; yes, sir; he certainly did.

Mr. HAY. How long have you been out there?

Mr. GREENE. Why, nine years—ten years this July coming.

Mr. HAY. And this is the first and only time you have ever—

Mr. GREENE. Yes, sir; this is my first and only time that I have ever had any cause to be called up before the superintendent, and I hope it is the last time as long as I am connected with the hospital.

The ACTING CHAIRMAN. Oh, make it longer than that.

Mr. GREENE. No; Mr. Smyser, I will not.

The ACTING CHAIRMAN. Because you are treading on thin ice if you have got that in mind.

Mr. GREENE. No, sir; because I was raised better.

The ACTING CHAIRMAN. Where were you raised?

Mr. GREENE. I am a Marylander—born and raised in Maryland.

The ACTING CHAIRMAN. You have told us the whole truth about this incident?

Mr. GREENE. I certainly have.

The ACTING CHAIRMAN. And you regret it?

Mr. GREENE. Yes; I certainly do sincerely regret it. I certainly do. It is very humiliating, I think, to have anything like this brought into the House of Congress.

The ACTING CHAIRMAN. Oh, we will not say anything about it.

Mr. GREENE. It is certainly humiliating, when a man is born like I was—certainly humiliating, because I am everything else than a plebeian. You know what a plebeian is? You know the meaning of the word?

The ACTING CHAIRMAN. Well, those things happen, you know. [Laughter.]

Mr. GREENE. Yes; in the best of families, don't they?

The ACTING CHAIRMAN. Yes, we regret it as much as you do.

Mr. GREENE. Well, I will promise that it will never occur again.

The ACTING CHAIRMAN. You want us to know that promise, don't you?

Mr. GREENE. Indeed I do. I certainly do.

The ACTING CHAIRMAN. That is all.

Mr. GREENE. Is that all? Thank you.

#### ADDITIONAL TESTIMONY OF R. L. BROWNING.

R. L. BROWNING, who has been heretofore sworn, resumed the stand and testified as follows:

The ACTING CHAIRMAN. How about this "jag" experience?

Mr. BROWNING. I think that report was very much exaggerated, Mr. Smyser.

The ACTING CHAIRMAN. Tell us about it.

Mr. BROWNING. We went out to a reception that night, and I understand that some people claim to be gentlemen when they are sober, but I want it distinctly understood that I am a perfect gentleman, drunk or sober; but I never was any more under the influence of liquor than I am now. [Laughter.] I can say that I had taken a drink, but I was not under the influence of liquor, and I waited until the night doctor came over, and the thing was reported to him.



I waited until he came, and I told him that I wanted him to see my condition, and I wanted him to report such to Doctor White. I stayed there until he came and made a report of it, but I never was under the influence of liquor. I will admit that I take a drink, but I never was under the influence of it, and I would not know how it would feel if I was under the influence of it.

The ACTING CHAIRMAN. This was reported to Doctor White?

Mr. BROWNING. This was reported to Doctor White, and I told him the truth, and nothing else but the truth.

The ACTING CHAIRMAN. What did you drink—port wine?

Mr. BROWNING. No; I must say that I did not drink port wine.

The ACTING CHAIRMAN. What did you take?

Mr. BROWNING. I took a highball. [Laughter.] I don't think one highball would make anybody drunk.

The ACTING CHAIRMAN. I do not know exactly. What are the constituents of a highball?

Mr. BROWNING. A highball—it is simply a little whisky and a little seltzer, I think.

The ACTING CHAIRMAN. That ought not to hurt anybody.

Mr. BROWNING. I don't think it ought to hurt anybody. [Laughter.]

The ACTING CHAIRMAN. Did you make a clean breast of this?

Mr. BROWNING. I honestly did.

The ACTING CHAIRMAN. You say you were not drunk?

Mr. BROWNING. I was not.

The ACTING CHAIRMAN. You felt a little good?

Mr. BROWNING. No; I did not feel the least bit under the influence of liquor at all. I waited for the night doctor to come over to examine me.

Mr. HAY. Did you report any attendants there for playing crap?

Mr. BROWNING. Sir?

Mr. HAY. Did you ever report any of the attendants for playing crap?

Mr. BROWNING. I have seen them playing crap, but that is all I have ever done.

The ACTING CHAIRMAN. What is crap?

Mr. HAY. I don't know myself.

Doctor WHITE. It is a game with dice.

Mr. HAY. It is a game with dice, is it?

Mr. BROWNING. I have seen them, but that is all I have done.

Mr. HAY. You did not make any report of it to the supervisor?

Mr. BROWNING. No, sir; I didn't have anything to do with it.

The ACTING CHAIRMAN. Who were playing, some old soldiers?

Mr. BROWNING. Well, we have right long hours there, and we ought to have something to break the monotony.

The ACTING CHAIRMAN. But, I say, were they old soldiers who were playing?

Mr. BROWNING. No; they were not old soldiers.

The ACTING CHAIRMAN. Patients?

Mr. BROWNING. I never saw anything—yes; they were patients.

The ACTING CHAIRMAN. Well, now, really do you think it hurt them to play that little game of crap?

Mr. BROWNING. I really do not.

The ACTING CHAIRMAN. Do you play seven-up yourself?

Mr. BROWNING. Yes; I can play seven-up.

The ACTING CHAIRMAN. That is the only game.

Mr. BROWNING. That is the only game. [Laughter.]

The ACTING CHAIRMAN. Was there anything wrong in that little sporting diversion that you saw there?

Mr. BROWNING. Not a bit. I do not blame them for playing, I really do not. I think it is really——

The ACTING CHAIRMAN. A relief?

Mr. BROWNING. A relief from the monotony.

#### TESTIMONY OF FREDERICK A. FENNING.

FREDERICK A. FENNING, having been duly sworn, was examined, and testified as follows:

Mr. HAY. Mr. Fenning, you are a practicing attorney here?

Mr. FENNING. I am.

Mr. HAY. How long have you been at the bar?

Mr. FENNING. Nearly five years. I graduated in 1901, and was admitted that year.

Mr. HAY. How long have you been employed in these cases at the hospital?

Mr. FENNING. Well, if the committee please, I can give you a rather concise statement as to how I became connected with these cases.

Mr. HAY. Yes; go ahead.

Mr. FENNING. When I was at the United States pension agency, in the Government service, I had charge for a good many years of the payment of pensions to fiduciaries. All of the payments to guardians, committees, or conservators have been through me. During the last few years of my connection with the Government service the Pension Office instituted a system of accounting whereby they endeavored to get the fiduciaries to account to the courts. Those accounts and court certificates passed through my hands, and I became aware of the fact that there were a great many fiduciaries who apparently were not capable of properly accounting. There were some cases, of course, where the account could not be rendered because the fiduciaries were unable to account from a financial standpoint—that is, they could not properly account for the funds coming into their hands—but most of them were cases where the fiduciary had had no legal training or business experience, so that they were more ignorant than they were criminal in their neglect.

I saw that, and at the time of resigning from the Government service to start practice it seemed to me there was a field here in the city for a man to act as what might be called a quasi public guardian. In a good many States they have public administrators, and I think that has been looked upon as a proper law; and the States which have the public administrators use those officials in connection with a good many estates. We have no law here providing for public guardians, and so, as I say, I thought there was a field for a quasi public guardian, a man who would let it be generally known that he was prepared to act as guardian or committee in all cases where there was any estate in this jurisdiction and where there were not responsible relatives in this District. So I went to Mr. Davenport, the First Deputy Commissioner of Pensions, who has just testified here, and

told him what I proposed to do. I went to the register of wills and to his deputy, and told them what I proposed to do, and that I was ready to act in all such cases. I also went to the agent of the Board of Children's Guardians, and the secretary of the board of charities, and some of the doctors at the Government Hospital for the Insane, and then I went to a large number of lawyers, and told them I was ready to act as guardian or committee in any cases they might have.

I want to say here that that plan appealed to nearly every attorney to whom I went, for the reason that an attorney who agreed to use me in that capacity was not himself parting with any part of his fee. He would get paid just as much for handling the case as he would if he had had a trust company appointed or if he had had some person in his own office or somewhere else appointed as guardian or committee. I have not only received from attorneys cases of this sort in which I have been appointed as guardian and committee, but I have had quite a number of attorneys—and the last one only within the past three days—send lunacy cases to me. In this case that came to me the other day the client said: "I have been sent to you because Mr. Harris"—an attorney up town here—"tells me that you handle more lunacy business than anybody in the District." This was a case of a woman who wanted to be herself appointed committee of her husband.

That, in brief, is the manner in which I happened to become connected with this business, and I can say that within two months after I resigned from the Government service and took that up business of that nature began to come in; and I have been appointed and I now am committee of, I think, about 65 lunatics and 1 habitual drunkard and guardian of about 7 minor children. Those appointments were all made by the courts here.

MR. HAY. Outside of these people for whom you have qualified as guardian from the insane asylum?

MR. FENNING. I say that now I am committee of about 65 insane men. That includes, I should say, probably 58 who are patients at the Government Hospital for the Insane.

When I took that matter up with some of the judges of the courts, as I did in the first instance, and told them what I was ready to do, Mr. Justice Barnard, who was then holding probate court and also hearing lunacy cases, remarked that he would be glad to appoint me in such cases, but he was in practically every case guided by the recommendation of the petition; that if a petition came to him suggesting some one else, and that person was a proper person, he should feel that he ought to appoint that person. Then it was up to me to see that I was the person suggested in the petition, because the judge had made it rather plain to me that he did not care, unless there was an unusual reason for it, to neglect the suggestion shown in the petition. At that same conference, or immediately after that, I discussed with Justice Barnard the procedure in these cases, with particular reference to what physicians and how many physicians should testify in lunacy cases, and Justice Barnard agreed with me that in accordance with the old Maryland law there ought to be the testimony of at least two medical men.

It was discussed as to whether those two medical men should be medical men from the city or from the hospital, and the conclusion that was reached was that the ideal arrangement would be to have

one physician from the hospital and one physician from the city. You can readily understand the reason for that. Take the case of a patient who had been to the hospital for eight or ten years. The physician who had been looking after him at the hospital, and who had been seeing him practically every day for eight or ten years, could testify as to his condition covering that length of time. The physician from the city could testify as to his condition at the hearing. In carrying out that plan there was another reason why you could not have two physicians from the hospital, as I recollect, and that is that the only two physicians who would be competent to testify in practically any case would be the two physicians in that particular department in which the patient was confined, and if they had to come to court on the same day it would take both of them away from that department. So I have used city physicians, quite a number of them, aiming to pick them out with regard to their knowledge of insanity and their experience in such cases.

I have had Doctor Nevitt, who used to be the police surgeon here, and who has testified on the stand that while he was police surgeon he testified in from 600 to 800 cases; Dr. William H. Heron, who has been practicing here in Washington for nineteen years, and whose practice is extensive and has included the treatment of a number of persons suffering from mental disorders; Dr. Charles S. White, resident physician at the Emergency Hospital, who, in connection with that position, has seen a large number of insane people picked up on the streets of Washington; Dr. P. C. Hunt, neurologist of Providence Hospital, and the physician employed by the District in connection with its indigent insane cases; and Dr. Lewis H. Taylor, resident physician at the George Washington University Hospital, and formerly a medical interne at the Government Hospital for the Insane. I think those are the only ones. Those men, if they have been paid at all, have been paid \$10 each in each case in which they testified. In cases where the amounts were small they were simply given to understand by me that they ought not to make any charge, and they have very readily agreed not to make any charge in such cases.

The question came up some years ago as to whether a physician on the pay roll at the Government Hospital for the Insane could properly receive a fee in those cases, and I think Doctor White has testified that in my conversation with him he said he thought it was a matter that ought to be determined by the court, which was perfectly proper. So I submitted to the justice holding equity court in November, 1904, bills for \$10 each that I had received from Doctor Hummer of the hospital and from Doctor Nevitt from the city. Justice Anderson took the matter under advisement, and kept it in chambers, I think, for two or three weeks. He asked me if I could find any law on the subject which would operate to prevent a physician at the hospital receiving a fee, and my recollection is that the only law I could find and cite was the statute which provides that an employee of the United States testifying in a case in which the United States is a party shall receive nothing in addition to his actual expenses.

Justice Anderson held that in these cases the United States was clearly not a party, so that that statute did not apply in such cases.

He then signed this order which I have here, and which I will be glad to submit to you, in the case of John Crowe. It reads:

In the supreme court of the District of Columbia. Holding an equity court.

IN RE JOHN CROWE, LUNATIC.—LUNACY No. 1652.

The committee in the above-entitled cause, having appeared in court and informed the court that he has received bills for \$10 each from Dr. Harry R. Hummer, Government Hospital for the Insane, and Dr. J. Ramsay Nevitt, Washington, D. C., for their services as expert witnesses at the lunacy proceeding held in this cause June 29, 1904, it is by the court this 14th day of November, 1904.

*Ordered*, That the committee be, and is hereby, authorized and directed to pay the said bills from the funds of the said lunatic.

THOS. H. ANDERSON, *Justice*.

I call your attention, gentlemen, to the fact that after the name of Doctor Hummer there appears in this order the words, "Government Hospital for the Insane," so you see that the matter was clearly before the court at the time the court signed this order.

I have just said that the only fees paid in these cases have been \$10, if any were paid, and that applies to every case, with the single exception of the case of George Bastin, which was not for services identical with those, and which I will be glad to touch on a little later.

In connection with this same case of John Crowe I want to call your attention to another order; signed by the court on the 2d day of November, 1904, and which directed me, as the committee of John Crowe, to pay to his mother \$25 a month of a pension that I was receiving for him, for board, medical attendance, and necessities of life. That was in compliance with a petition signed by Mrs. Crowe and sent from New York. It also directed me, as committee in the case, to pay to William D. McNulty, an attorney at law in New York City, for his professional services in the lunacy proceeding, the sum of \$100, and the further sum of \$24 for his expenses. Mr. McNulty, who is an attorney at New York City, came down to Washington to make inquiry as to having the committee appointed for the purpose of collecting the pension and arrears of pay in the case of John Crowe, and it was found that it would be necessary to have some one in this jurisdiction appointed. He then went back to New York, and he was only here, as I recollect, one day.

After he got back to New York he took the matter up and prepared a petition to be signed by Mrs. Crowe. He sent a bill for \$24 for the expenses incurred in the trip to Washington, and a \$100 fee, and the court approved it. I ask the members of the committee to bear that in mind in connection with the future fees that may be discussed in these proceedings, and please understand that I am not criticising that fee at all. It was perfectly proper, in my estimation, and it was approved by the court.

Mr. HAY. If it had not been approved by the court, it would have been your duty, as the representative of the estate, to have resisted the payment of the fee, would it not?

Mr. FENNING. Yes; and I may say right now, that, as committee, I never make any payment without getting an order in advance from the court, unless the payment is covered by precedent. I will pay

the doctors \$10. If there happened to be a new proceeding to-day, and the estate was sufficiently large, I would pay that without an order of the court, because I know that the court has similarly allowed fees of that size.

In connection with the case of Philip Thomas, I want to say just a word. You have had in the record here copies of the original petition, the bills of doctors, and my account—certified copies brought here by the Medico-Legal Society, showing the amount that I had taken in and how I had disbursed it, and so on.

I want to call your attention to the fact that in getting those certified copies the Medico-Legal Society did not get from the court record and bring here a copy of the final order passed in that cause. It was passed and filed on the 22d day of January, 1906, and it was among the papers when they got the other papers, and this order which closed the Philip Thomas case particularly provides that my account, which had been examined by the court, "is hereby approved." I submit, gentlemen, that in bringing the papers in that particular case into this committee, it was an improper act not to bring all the papers—in other words, not to show the committee that the account that they laid before it had been approved by the court.

MR. HAY. Do you desire that order to go into the record?

MR. FENNING. I think it ought to be in the record.

MR. HAY. Well, just read it and the stenographer can take it down. Or can you hand it to him?

MR. FENNING. It is as follows:

In the supreme court of the District of Columbia. Holding an equity court.

IN RE PHILIP THOMAS, LUNATIC.—LUNACY NO. 1900.

Upon consideration of the first and final account of Frederick A. Fenning, committee in the above-entitled cause, it is by the court this 22d day of January, 1906.

*Ordered*, That said account be, and is hereby, approved, and the committee is authorized, after deducting the commission of \$22.61 and adjusting the costs of the clerk's office, to pay the balance to the superintendent of the Government Hospital for the Insane for the personal use of the ward and for the latter's burial expenses should he die while a patient at that institution, and upon filing the receipt for such payments the committee shall be discharged from further service.

THOS. H. ANDERSON, *Justice*.

I say that it was not a fair thing, in getting the copies of those papers, not to get a copy of the paper showing that the court had approved this account; and that is the reason they did not get it.

Just touching for a moment on the question of counsel fees and fees of committees, I want to call your attention to the case of Nicholas Brunich, lunacy No. 1694.

MR. HAY. Is he an old soldier?

MR. FENNING. I can tell you in a moment. This account was filed back in August, 1905. This man was admitted to the Government Hospital for the Insane a good many years ago. He became insane on the high seas, and was taken in charge, I believe, by the Marine-Hospital Service. After he had been in the hospital for a number of years, they received a letter from the Philadelphia Saving Fund Society, a banking house in Philadelphia, saying that there was a deposit which, with interest, amounted to \$189.97 on their books belonging to this man, being money which he had deposited before he

became insane; and that if the man had a competent committee appointed by the courts the money would be paid.

The situation was this: Here was a man over in the Government Hospital for the Insane who could use his money in small sums from time to time, under the direction of the hospital staff, but the money was tied up in Philadelphia and he could not get it without a committee. That was the very situation that I hoped to reach when I was appointed in this case, and I asked the hospital, as I have asked the Board of Charities and other organizations, that they file a petition in court suggesting that I be appointed the committee in the case so that this man would get the benefit of his estate. I collected \$189.95 deposited in the bank, and during the year that I held it it amounted, with interest, to over \$192. My account in the case shows that there was a counsel fee of \$15; that my commission was a commission of 10 per cent, amounting to \$19.20, and out of that \$5 was deducted for the bond, so that I got \$14.20.

The Medico-Legal Society have brought into this committee the account in the case of Phillip Thomas, in which the estate amounted to about \$224, and they have referred to it a good many times. It would have been a fair thing for them to have brought in the account in this case and showed it to the committee, so that it would know that in this case there was a counsel fee of \$15, because the amount of the estate was small, and there was a commission of \$14.20, because the amount of the estate was small. That is a feature that I have always paid particular attention to, where the amount of the estate is small, that all of the charges against it shall be small. You will not find in these cases a single payment to a physician where the amount of the estate was less than \$200. In those cases the physicians understand they are not going to get compensation for their services. It would have been fair for them to have brought this account in and to have submitted it to you; and that is the reason they did not do it.

There are one or two more very similar cases. There is the case of Andrew Kopeso, lunacy, No. 1864, over at St. Elizabeth's. I was appointed committee of this man Andrew Kopeso on the petition of his brother. I collected arrears of army pay amounting to \$62.04. There are exactly four items of expense in this account, which were submitted to the court and approved on the 3d of January, 1906. Those expenses were: Court costs, \$6; marshal's fee, \$1.50; notary fees, \$0.75, and a cardigan jacket, which I furnished the man at Christmas time and which cost \$5. The court allowed me a commission of \$11.20, and out of that \$5 was deducted for the bond. So that the amount that I got for my share, for conducting the lunacy proceedings, for obtaining his arrears of pay, and for applying for a pension for him was, net, \$6.20. This account was submitted to the court and was approved by the court before any suggestion was made of these proceedings in this committee.

There is the case of Miss Hart, who has been over there for a good many years. I have here my petition, filed on the 26th day of last February, in which I show to the court that ever since December, 1903, when I was appointed committee in this case, I have been making active efforts to dispose of two bonds of the Petworth Real Estate and Improvement Company that belonged to her. Her friends knew that she had these two bonds and nothing else, and that if she died she would have to be buried as an indigent patient in the hospital

cemetery, and they thought it would be well if we could convert them into cash to provide for her better burial, or to give her the benefit of the proceeds in her lifetime. This petition shows that after considerably over three years of active efforts on my part to dispose of those bonds I finally found that they were entirely without value, and had to turn them over to the clerk of the court. There is a case where there was absolutely not one penny of compensation.

That is another feature that I ask you to take into consideration, that if a man handles a great deal of this kind of business he can do the work for less money. I can afford to handle a case like this case of Miss Hart, which was very small, for absolutely no compensation, or this case of Andrew Kopeso for a fee of \$6 and some cents, because the hospital will send me other cases from time to time in which I can get a reasonable compensation. Certainly if I did not get the bulk of the business of that kind I should not pay any attention to a case that did not pay a reasonable fee. I place too high a value on my time. I would not take up a case in which I could not see something ahead unless I was getting more business of the same kind.

Here is the case of Charles O'Neil. Some mention was made of this case—I forget by whom—in the testimony. Charles O'Neil was a retired soldier of the Marine Corps. I was appointed in this case at the suggestion of Doctor White, who filed the petition. The man had no relatives at all.

My final account, which was submitted to the court and approved January 11, 1906, shows that I took in altogether \$250.72 belonging to that man. I was allowed a commission of 8 per cent, and out of that I had to pay \$5 for my bond, and I paid for the ward's burial, and that left a balance in my hands amounting to less than \$75. I suggested in my petition that "in view of the apparent absence of heirs in this case and also the small amount remaining, the committee is of the opinion that this estate can best be closed by authorizing the purchase by the committee of a suitable headstone to be erected over the grave of the ward." The court agreed at the time, and he considered that a very proper disposition of the fund, as the man had apparently no relatives, and on the 22d day of January, 1906, passed this order confirming my account directing my discharge as committee and authorizing me after adjusting the costs of the clerk's office to pay the balance remaining in my hands for a suitable headstone to be placed at the grave of Charles O'Neil, and upon filing in the cause the receipts for the said burial expenses and the said headstone that I might be discharged from further service.

That is only one of the things that I have tried to do for these men. The money belongs to the men who have earned it, and if they can get any benefit out of it in their lifetime or, in a case like this, if their memory can get any benefit, such benefit should be given as against having the money go, ultimately, after possibly twenty years, to relatives who have taken no interest at all in the man during the latter years of his life.

I want to refer, if the committee will allow me for a few moments, to the testimony that has been given relative to my connection with these cases a few days ago. If there are other questions that the committee would like to ask me, I would be glad to answer them. Before I refer to the testimony, I will refer to two or three other cases in reference to the commissions I have charged.



One of them is the case of Thomas J. Harrison, lunacy No. 1490, in which case an employee of the corporation counsel's office was appointed committee. I had no connection with the case at all. The patient was at the Government Hospital for the Insane, and the account, as approved by the court, shows that the committee took in \$144. That was the entire amount coming into his hands. The lunacy proceedings had been conducted by the District and paid for by the District, so that when the attorney who prepared the petition for the appointment of the committee came into the case he had nothing to do with the proceedings, but simply filed a petition to have this man in the corporation counsel's office appointed as committee; and for preparing and filing that petition that attorney was allowed \$35 out of an estate of \$144. The committee was allowed the full commission of 10 per cent, \$14.40, and he was also allowed \$10 that he had paid for his bond.

You will note that in every one of my cases the bond is deducted from my commission. I am not criticising this charge, but I simply call the attention of the committee to the fact that out of the \$144 the court gave the attorney \$35 and gave the committee \$14.40 and added to that \$10 for his bond.

Here is a case which is almost similar, in which the same employee in the corporation counsel's office was employed. It is the case of David J. Barr, lunacy No. 1662. The whole estate amounted to \$331.50. The attorney who prepared the petition for the lunacy proceeding was allowed \$35 out of the \$331.50, and the committee was allowed the full commission of 10 per cent, \$33.15, and added to that was \$10 that he had paid for his bond.

You gentlemen will possibly remember that in the case of Philip Thomas, the papers in which case are here, I refer in the account to the fact that I had prosecuted a claim for arrears of pay in person, and without the services of attorney. It would have been perfectly proper for me as committee to have turned that claim over to an attorney practicing before the Department, and to have had him obtain the allowance of that claim. Colonel Payne has testified this afternoon that if such had been done the attorney's fee would have been a reasonable charge, but as it was not done he took that into consideration in stating my accounts.

I have here the papers in the case of Manuel Ferrara—equity No. 14066. This is a case in which the Washington Loan and Trust Company were appointed committee. They wanted to collect arrears of pay due that man, and instead of filing their claim and prosecuting it themselves, as I have done, they filed it through an attorney. The claim was allowed, in the sum of \$376, and the attorney submitted a charge of \$79. That charge exceeds 25 per cent of the amount obtained, and that charge was approved by the court.

You want to bear in mind, gentlemen, that that is in addition to counsel fee paid to the solicitor for the Loan and Trust Company in the lunacy proceedings. This had nothing to do with that, but is simply for obtaining the arrears of pay from the United States. As you will see from the account in the Thomas case and in other accounts of mine, if you wish to examine them, I collected the arrears of pay as committee directly, and made no charge for it.

Mr. HAR. As I understand it, you went into this business on your own account. You saw that there was a field here, as you say, and

you thought it would be a good field, and you have continued in that line—

Mr. FENNING. Yes, sir.

Mr. HAY. And you have continued not only to solicit these cases from the Government Hospital for the Insane, but from others?

Mr. FENNING. From every institution and from all the attorneys I could reach; from anybody who was connected in any way with a case requiring the services of a fiduciary.

Mr. HAY. Some intimation has been made that perhaps you were, to use a vulgar term, in cahoots with somebody out at the institution, and that they get a part of your fees, or that you compensate them in consideration of the fact that you are employed in a case. Is there anything in that?

Mr. FENNING. No; there is absolutely nothing in that. I get business from the several institutions that I have named—the Board of Children's Guardians, the Board of Charities, and the Pension Office has sent me some business. The Government Hospital for the Insane has sent me more business than any other institution, because it is a great deal larger, but no one connected with the hospital, or connected with any other institution with which I have any connection has received from me one cent of remuneration.

Mr. HAY. A good deal has been said about the case of Miss or Mrs. Corbett. I wish you would explain about that. It has been stated here, and I believe there has appeared in the public print, in some newspaper—I do not know what the name of the newspaper was—

Mr. BARCHFELD. Truth.

Mr. HAY. Yes—that you sold a large amount of property there for a very small amount of money.

Mr. FENNING. I can tell you in a few words the history of that case. Those ladies were adjudged insane about June, 1904—Mrs. Corbett and her daughter. They were the remaining members of the family, with the exception of one other daughter, who was an inmate of an insane asylum at Staunton, Va.

Doctor Hamlin, who had been their pastor for a number of years, came to my office, having heard about my connection with these lunacy cases. He came and told me of this case and said that the furniture and clothing and personal belongings of these ladies were out in a house in Eckington, which they had been occupying for some time. He said the house was locked and the keys were in the hands of the police, and the agent for the property was insisting on his rent, which was in arrears nearly two months. He suggested that I be appointed the committee in the case, and I consented. A petition was prepared, and I was immediately appointed committee by Justice Anderson. I at once filed with the chief of police a certificate showing my authority, and he turned the property over to me.

I put in a great deal of time in that case—at nights, on Sundays, and on the Fourth of July, as I recollect, 1904—and knowing that something would have to be done at once to get rid of that furniture there and to raise money to pay the rent, I went over to see the superintendent of the hospital, and he saw me on the Fourth of July, which was a holiday. I told him that there was one question that I wanted to have definitely answered, if he could answer it, and that was whether there was a possibility of the early recovery, or the recovery within a reasonable period, of either of those women. His answer to

me was that the chance was about one in a million, and I then made up my mind that it was up to me, as committee, to do something, and the only thing to do was to get rid of the expenses which were growing each day in caring for that stuff and also to find some place to put it. It would have been a very foolish thing to have stored that stuff. It would have incurred additional expense from month to month for caring for it. So I communicated with every one of the relatives that I could find, and there was a host of them over in Virginia. They came over here. There were two factions, and we took them out at different times.

I took them out and showed them everything in the house, and asked them if they recognized anything in the nature of heirlooms, and if so to put a price on it. Those relatives—there must have been eight or ten of them—picked out articles which they thought they would like to have, and I had them write down on slips of paper what they would give for those articles. They did not know when they were writing that down whether any other relatives were going to pick out the same things and offer more or less. I took those slips, those informal bids, for that is what they were, and I went over them and found out who would pay the highest price for each of the articles named in the slips. Then I took this offer of prices to an auctioneer. He went out there with me on the 4th of July, in the afternoon, and went over everything; and he signed the certificate which I have here, and which was filed in court, to the effect that he had personally examined the articles named in this schedule and that the prices named were good, fair prices for the articles.

I took the schedule with the names of the bidders and the certificate of the auctioneer into court with my motion that I be authorized to accept these prices, and that I be authorized, after at least two days' notice being published in the Evening Star, to dispose of the balance of the goods at public auction. Justice Gould signed the order on the 5th day of July, 1904, and as soon as I could after that and after giving the announcement, I conducted that sale in person. I got for the goods that were sold an amount that was very much in excess of what the auctioneers, who were experienced in such cases, expected to realize from the sale. The money was turned over to me as committee, and we were enabled to turn the house over to the agent, so that not more than two months' rent had accrued. That is, the sale was conducted, as I recollect, about the 7th or 8th of July, and I went out after that and turned the house over to the agent. I may say that I saw the agent immediately upon my appointment, before I had had a chance to learn anything about the affairs of the Corbetts and the involved situation, and he said he was going to attach the furniture unless the rent was paid immediately. I gave him my personal assurance that out of the first funds that came into my hands the rent should be paid, and that is the reason he permitted the stuff to stay there and did not attach it.

The Corbetts—not so much the Corbetts themselves, but these would-be and supposed friends of theirs who keep bothering the life out of them over there—have constantly hinted that there is a lot of money due the Corbetts, and they have called attention to the fact that Mr. Corbett named three executors in his will, and that they were required to give a large bond, and that certainly a large estate was being squandered. You must recollect that Mr. Corbett died

some eight or nine years ago, and his affairs were administered in the Virginia courts. I was not prepared to go over into the Virginia court and make a proper kind of examination as to the Corbetts' estate, but I went into court and asked for authority to employ an attorney who was practicing in the courts of Virginia. I suggested Mr. Crandall Mackey, who has some position in Alexandria County. I believe he is State's attorney.

Mr. HAY. Commonwealth attorney.

Mr. FENNING. Commonwealth attorney. He had had a lot of experience in those courts, and he knew the parties, and he would make a full and complete examination. He was employed, and Mr. Justice Anderson fixed the fee at \$25, to be paid after he rendered his report. He rendered his report, which consists of about 21 typewritten pages, and he sets out the numerous accounts that have been rendered by the executors. He shows that the executors received about \$25,000 from the sale of the real property and about \$15,000 from the sale of personal property, and that the executors claimed that Mrs. Corbett elected to take under the will. The estate has practically been insolvent, and the executors claim that Mrs. Corbett elected to take under the will, and for that reason she has not received anything to speak of from the estate. If she had insisted on her dower, she would probably have had several thousand dollars out of the sale of the realty. When this report was submitted to me I sent it back to Mr. Mackey for a professional opinion from him as to whether she was barred, having elected, and also whether it was incumbent upon me as committee to exercise any authority, such as she might have, or any privilege, such as she might have, and his report, which was received just a couple of weeks ago, consists of a final recommendation that a petition be filed in the Virginia courts for the assignment of dower. I submitted this latter report to Mr. Chief Justice Clabaugh, with the suggestion that I thought the way to find out whether anything more was coming to this woman was to file that petition; that Mr. Mackey had agreed to take it up on a contingent fee, and that we would have to pay the costs incident to the proceeding. The chief justice directed me to further communicate with Mr. Mackey as to the approximate costs. Mr. Mackey has been in Virginia, and I have not been able to reach him, but when he returns I will propose that he add to his report a suggestion as to the approximate costs.

Mr. HAY. That report will be filed?

Mr. FENNING. It will be filed in the Corbett case in our courts. That report is dated the 10th of May, 1906. I took it in to the chief justice some time ago, and he told me he would rather have Mr. Mackey add a statement about the approximate cost of the proceeding. It has taken a long while to prepare it, it involving an examination of three or four sets of accounts, filed with the commissioner of accounts there, and an examination of deeds in connection with the real property, and so on. I do not see that there has been any waste of time, but that is the real history of the Corbetts. They have not realized what has been done in the case.

Mr. HAY. There is a case of a man named Logue. You have heard that evidence, I suppose, about that case?

Mr. FENNING. I do not know that I heard the evidence about it.

Mr. HAY. It was stated that Mr. Logue was gotten out of the hospital on habeas corpus proceedings, and that an application was made to you to turn over to him what was due him, and you resisted it and had a proceeding instituted after he was discharged from the hospital to determine whether or not he was insane.

Mr. EVANS. That is the Bastin case.

Mr. HAY. Well, I do not know that it is in the proceedings we have had, but it is stated that you declined to pay Mr. Logue, and that you still have funds in your hands belonging to him.

Mr. FENNING. I can tell you about that in just a moment.

Mr. HAY. That you loaned out \$300, I believe, or something of that sort.

Mr. FENNING. That is right.

Mr. HAY. Logue himself was on the stand.

Mr. FENNING. Yes. I was appointed in the Logue case on the petition of George S. Wilson, the secretary of the board of charities of the District of Columbia. The board of charities had this reason for getting into this case: Mr. Logue had been over at the hospital for several years. During all that time he had been supported by the District of Columbia as an indigent patient. If the District of Columbia could rid itself of that burden, it was ready and anxious to do it. In order to rid itself of it, however, it would have to have the accumulation of pension paid to some committee, and to have the court order the committee to pay for the keep of that man. This would relieve the District. So the petition of the board of charities was filed before the court, asking for the appointment of some competent person as committee, and that the court order the committee to reimburse the District for the amount expended for the board and maintenance of the lunatic, and to make back payment for this purpose to the Government Hospital for the Insane at the rate of \$5 a week.

Mr. HAY. It was intimated in the evidence of Mr. Logue, or somebody, that you got the information that Mr. Logue had this fund from Doctor Hummer, I think.

Mr. FENNING. Yes; that was intimated in the evidence, and it positively is not so.

Mr. HAY. As a matter of fact, the application was made by the secretary of the board of charities, and was not made by the superintendent?

Mr. FENNING. Exactly; and I have it right here, for your inspection, if you would like to see it.

Mr. HAY. Do you know how Mr. Wilson happened to name you in the petition?

Mr. FENNING. I will again call your attention to the fact that I had been in constant communication with the board of charities, and they knew that I was ready to act in such cases; and in conversation with Mr. Wilson, the secretary of the board of charities, some time before this, I told him that probably he had several cases of this nature where the District was supporting patients, and that if he had and they thought the District ought to be relieved of that burden, I was ready to take the cases up. Then the question came up, "how are we going to tell what cases there are?" So I told him if he would let me see the bill submitted by the hospital each month, showing the names of

the patients charged against the District, that I could readily tell from going over that list a number of names of pensioners. I had been in that business for fifteen years in the Government service, and I had been seeing those names day after day and month after month; and I suppose that until my dying day I will recall the names of a great many of the pensioners. So, in going over that list, I came across the name of Logue, and there were one or two other cases in which Mr. Wilson was also interested. From the time the court signed the order in this case, permitting me as committee to pay the money, the District has been properly relieved of the burden of supporting that man.

Mr. HAY. When was that application filed?

Mr. FENNING. That application was filed in December, 1904, and my recollection is that it was acted on at the same time. The court did not comply with the prayer of the petition, in that it did not direct a reimbursement to the District for past payments. The courts have always been very slow in cases of this kind to make any payments for past maintenance. The court in this case appointed the committee and directed that a payment of \$5 a week be made for support.

Mr. HAY. How long after the application was filed was he discharged from the hospital on habeas corpus proceedings?

Mr. FENNING. This was filed December 5, 1904. My recollection is that it was early in August that he was discharged. It was last summer—I should say probably in August.

Mr. HAY. August, 1905?

Mr. FENNING. Yes, sir; August, 1905. I collected the pension in that case. In rendering my account to the court I called attention to the fact that an order of the court was signed on the 5th of December, 1904, directing me to pay \$5 a week for the keep of the man; that I had made such payment for a while, and when this act of February 20, 1905, was passed, that the whole pension should be paid, I wanted an instruction as to whether I should keep on paying \$5 a week, or what should be paid. That matter was referred to the Auditor, and my recollection is that Mr. Logue, through Mr. Evans, filed a motion in court that I be directed to turn the whole fund over to the man. I very properly resisted that by calling the court's attention to the fact that the matter was then before the Auditor, and the court certainly was not going to take it out of the Auditor's hands until he reported. The court, however, asked if \$200 could not be paid to Mr. Logue then and there, for living expenses, without in any way jeopardizing any claim the hospital might have under that order of December 5, 1904. I consented, and I told the court and I told Mr. Logue that I would make such payment to him at once, and I did. The order was signed one afternoon and I paid him the first thing next morning, at my office.

Mr. A. W. Thomas testifies here that my attitude was not that of an ordinary committee man in the case; that he came to me and made a demand for the money—and he did. He came into my office immediately after Mr. Logue was discharged on habeas corpus proceedings and demanded the money. I told him most assuredly I was not going to pay him or Logue or anybody else the money until I accounted to the court. I am under bond for double the amount that I have in any of these cases. I told him I would prepare the account and file it in

court. He said something here to the effect that I said I should have thirty days. He says, "Mr. Fenning demurred and said that he should have thirty days in which to do that, that they had thirty days to pass upon it." I probably told him that under the rules of the court after the Auditor reported the account would have to lie thirty days in the clerk's office before it was approved. Then he says he told me, "There are charges in your account which we can properly dispute, but I am not disposed to do that, because the man wants his money and wants to go away, and he is absolutely without any money."

That is all right. He did tell me that; and the minute he told me there were charges about which they could make a dispute, but that they would not do it if I would consent to pay that money, I told him to get out of the office. I will not have anything to do with a man who would make a suggestion to me that he will agree to let my account go through if I do this way and do not do that way. He got out of my office, and if the committee want witnesses as to that they can call my then stenographer, Miss Horan, who is now a clerk in the Agricultural Department, and Mr. Gawler, the undertaker, who was in the next room and who heard me fire him out.

Shall I continue about the Logue case?

MR. HAY. I was going to ask you if you were proceeding to settle up the Logue case in the usual way or whether you were putting any obstacles in the way of Mr. Logue getting his money?

MR. FENNING. Absolutely none. The matter is now before the court on an objection filed by Mr. Evans to the report of the auditor. The auditor finally reported that in his opinion the order of December 5, 1904, should be controlling, and that the hospital should be paid at the rate of \$5 per month. Mr. Evans filed an objection after the time in which to file an objection had expired. They have thirty days in which to file objections to the auditor's report. I then called the court's attention to the fact that this objection had been filed after this time, and the court asked me to prepare a brief on that subject, and also on the subject of whether I had been properly appointed. Mr. Evans also attacked the original appointment in the case and claimed that it was illegal, and I presume Mr. Evans made some argument or prepared a brief. The whole matter is before the court, and my information is that possibly the court is holding that up, because these papers have been up here two or three times, and perhaps the court can not get at them.

Mr. Thomas says about this Logue case, "These proceedings brought by Mr. Fenning." I did not bring any proceedings at all. They were brought by the board of charities.

He also refers to the fact that there were doctors' fees in this Logue case. That is a small matter, whether there were or not, except that, inasmuch as there were not doctors' fees and it is not shown in his evidence that there were no doctors' fees, it simply shows that he was lying when he came here and spoke about the doctors' fees in that case.

Going on further in the same testimony, he says that one thing I did, in order to get the court's ratification of an investment, was to get the court's order that the Security Title and Trust Company must guarantee the title, for which the Security Title and Trust Company have a charge of \$10. In the first place, there is no company known

as the Security Title and Trust Company doing business here. In the second place, those companies do not charge \$10 for an original certificate of title. They charge \$25 and \$30.

Mr. Thomas, under oath, in testifying here that I went into court, and that the court directed that the Security Title and Trust Company should guarantee the title, and that I consented that they should have a charge of \$10, made that up out of the whole cloth, for the reasons I have given to you. That will be apparent to you from an examination of the title certificate in that very case, of the Washington Title Insurance Company, which starts off "In consideration of \$25, paid to us by George W. Grice et al.," etc. George W. Grice and others were the people borrowing the money, and any man who has had any business experience knows that the man who borrows is the man who pays the bills. Yet this man comes and suggests that I paid \$10 out of my ward's funds for a title certificate in order to assist in loaning the money. He not only lied to you, gentlemen, but he tried to pull the wool over your eyes.

Speaking of the loan in the Logue case, I want to call your attention to the fact that the title certificate shows that the title of the property is good in George W. Grice and others——

Mr. HAY. I do not think we care about that. I suppose the law permitted that.

Mr. FENNING. Yes, sir. But I want to call attention to it to show Mr. Coldren's connection with it. That title was good in Grice subject to a first deed of trust to Mr. Fred G. Coldren in the sum of \$1,800, divided into four notes. Mr. Evans in his testimony said that he had observed the name of Mr. Coldren in some capacity on the note as one of the parties in interest in the loan on the Logue case. He did not know whether he was the maker or indorser. Being asked by Mr. Smyser whether as maker or as indorser he was good, he said he did not know. That did not seem to make any difference to Mr. Evans. And in his testimony he said that he would not want to loan money to his law partner if he had one. Manifestly in preparing four notes I would not have prepared them payable to different estates, but I used the system that is in use by people in preparing such notes generally, and that is to make them payable to a disinterested person who will indorse them over without recourse. And you can see from the notes I have here in this very case that Mr. Coldren did indorse them over to me as committee in the various cases, signing them without recourse.

Mr. HAY. Are they all of the cases which have been referred to?

Mr. FENNING. I wish to make a few remarks in connection with the testimony that has been given here, if you care to hear them.

Mr. BARCHFELD. Yes; we would like to hear it.

Mr. FENNING. Mr. Thomas, still supposed to be testifying under oath, says, on page 2707: "It does not appear that they have gotten a fee on all cases," referring to the physicians, "because the cases are not all settled; but where they are settled I find that" so and so, referring to the physicians' fees. That is a lie——

Mr. HAY. Mr. Fenning, use parliamentary language, if you please.

Mr. FENNING. I beg your pardon. That is a fabrication. I have shown cases in which the settlements were made long before this man went on the stand where there was absolutely no fee paid to the doc-



tor. Yet he comes in and says the cases are not all settled, and that when they are settled there will be fees to the doctors.

He testified also—I have forgotten the dates; I will give them to you—that between September 8, 1904, and November 25, 1905, I had been appointed committee in 62 cases by the court, and that fully three-fourths of these cases were cases of old soldiers, and he says, "The old soldiers in the great majority of these cases—in nearly all, in fact—were pensioners." I am now testifying under oath that during that period I was appointed in 69 cases, 10 of which, and only 10 of which, were cases of pensioners. That is rather immaterial, as to whether there were 10 or 50, except that it goes to discredit his testimony given before this committee.

Mr. HAY. How many of the cases out of the 69 cases you refer to were old soldiers—not old soldiers, but soldiers?

Mr. FENNING. The very large majority of them were soldiers.

Mr. HAY. You draw a distinction between soldiers and pensioners?

Mr. FENNING. Why, certainly. As I say, it does not make very much difference whether they were pensioners or not, but it makes a difference in showing that this man has come before you—

Mr. HAY. You draw attention to it because of the fact that he states they were of a particular class, when they turn out to be of some other class?

Mr. FENNING. Yes, sir. There is no way, Mr. Hay, in which he could have told from an examination of the papers in court whether those people were pensioners or not. They might not have been pensioners at the time the proceedings were instituted, and they might have been put on the pension rolls three months from then. No man could tell by going and examining the papers how many of them were pensioners and come and tell you that.

In answer to a question by Mr. Smyser, on page 2719, after he tells what he would take my job for, he says: "Well, lawyers do not like to do business by wholesale."

I am going on this record here as saying that I am willing to do business by wholesale whenever I can get it; and it seems to me that in that testimony Mr. Smyser struck the keynote, when he asked whether this thing did not have to be done. It has got to be done. These people have got to have a committee appointed for them if, under the laws as they now stand, they are going to get the benefit of the money that is coming to them. Congress has changed that, as regards pensions, since the 20th of February, 1905. If Congress wants to make any other change as regards arrears of pay, Congress can do it, but we are operating under the law as it now stands. Congress can go ahead and legislate if it wants to, but I say that it can not reach a case such as that of Brunich, who had money on deposit in a Philadelphia banking institution.

Mr. HAY. Was he a soldier?

Mr. FENNING. No; he was taken up on the high seas.

Mr. HAY. But where they are inmates of the hospital, and are taken by practically everybody to be insane, what is the use of putting their estates to the expense of these proceedings?

Mr. FENNING. Well, under the law as it now stands—

Mr. HAY. I understand; under the law as it now stands.

Mr. FENNING. As regards men who are soldiers, there is no reason

why Congress could not control the whole thing. It would probably take the form of an act authorizing the Department to pay the arrearages directly to the superintendent of the hospital, just as was done in the matter of pensions.

Mr. HAY. And require him or some one else to keep account of it.

Mr. FENNING. Yes.

Mr. HAY. And if the soldiers were discharged cured it would be paid over to them.

Mr. FENNING. There is no doubt that Congress can have full authority over any fund coming from the United States.

I want to call attention to this advantage of drawing the money for these men. That is, that they get a personal benefit out of it; and if the man dies without his arrears of pay being paid the relatives can come up twenty years from now, relatives as remote as brothers and sisters, and get that arrearage of pay. But if there was a law passed by Congress applying to arrears of pay and to the disposing of it without the intervention of these proceedings it could be done, it seems to me, without putting the estates to the expense of these proceedings.

Mr. HAY. Of course a small estate of \$75, \$100, or \$150 would pay its proportion of expense, would it not?

Mr. FENNING. No, sir. Where the estate is as small as that it does not. I have shown you one case where my fee amounted to only \$6.

Mr. HAY. I do not mean your fees, but all the fees in the case.

Mr. FENNING. All the other fees combined amounted to \$7.25. That made the total fees less than \$14 on the estate of \$62.

Mr. HAY. And \$5 for the bond?

Mr. FENNING. That is included—no, \$5 for the bond. That is right.

Mr. HAY. Is there any other case, now, that was referred to that you care to speak about, because it is getting late, and we want to get through?

Mr. FENNING. I would rather have the committee adjourn, and I will conclude the first thing in the morning.

Mr. HAY. Very well.

The committee (at 4.45 o'clock p. m.) adjourned until to-morrow, Thursday, June 21, 1906, at 2 o'clock p. m.

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#### HOUSE OF REPRESENTATIVES,

*June 21, 1906.*

The committee met at 2 o'clock p. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, and Hay. Also, Doctor White and others.

#### TESTIMONY OF FREDERICK A. FENNING—Continued.

FREDERICK A. FENNING, who had been previously sworn, resumed the stand and continued his testimony, as follows:

Mr. HAY. I think we got through all the individual cases yesterday afternoon, except perhaps one to which you referred. Will you just go ahead in your own way?

Mr. FENNING. In my testimony yesterday afternoon I mentioned that I had paid physicians a uniform fee in lunacy cases of \$10, with a single exception—the case of George Bastin—and said that I would later refer to the amount I paid in that case. That case has been referred to both in the testimony of Mr. Bastin and in the testimony of his counsel, Mr. Croxdale, and Mr. Croxdale called the committee's attention to what he considered an unnecessary proceeding in court, resulting in an examination.

That examination was brought about by my petition filed in the court in October, 1905, in which I informed the court that I had been informed by Mr. Bastin's attorney that Bastin was about to ask the court to sign an order declaring him restored to reason, and that it had been nearly five months since Bastin had been discharged from the hospital. At the time of his discharge from the hospital the superintendent had certified that he was of sound mind, but having seen him very frequently during the five months after his discharge from the hospital I was not at all certain in my own mind that he was at that time of sound mind. I had in my hands nearly \$2,000 belonging to him, and before I turned that money over to him I wanted to know definitely whether at that time he was in a proper mental state to receive it. Those facts were set forth in this petition filed in court, the prayer being that the committee be authorized to employ two physicians to make a thorough examination as to the present mental condition of the said Bastin, the reports of such physicians to be presented to this court in connection with the proposed proceedings for the purpose of having the said Bastin restored to reason.

On that petition Mr. Justice Anderson signed an order authorizing the employment of the physicians for that purpose, and at the time of signing the order he called my attention to the fact that no mention was made of the compensation, and he asked what I proposed to pay them. My recollection is that I suggested that that was a matter for the court, and the court took the position that he had better fix the fee at that time, and of his own motion he wrote in this order "At an expense of not exceeding \$25 each." I have the original order from the files of the court, and will hand it to you if you care to see it.

Mr. HAY. No; that is all right.

Mr. FENNING. I might say that the examination in this case in my opinion, and I think in the opinion of the court, was different from the ordinary examination, for the reason that the physicians were called on to examine a man who had twice been in the hospital and who had been trying, on two or three occasions, to live out of the hospital, and who, if he was declared to be of sound mind, would immediately come into possession of about \$2,000.

Mr. HAY. You mean the patient had been in the hospital and had been discharged, and had then been returned again?

Mr. FENNING. Yes. Twice he was an inmate of the Government Hospital for the Insane; and those physicians were required not only to make an examination, but to make a written report to the court. They reported to the court that in their opinion he was of sound mind, and upon that report being filed the court signed an order discharging me as committee, and a settlement was made with Mr. Bastin.

Mr. HAY. Mr. Fenning, some criticism has been made by some of these gentlemen of the fact that you have in some cases in which you were employed as guardian, or in which you were guardian, paid a fee

to Mr. Coldren, who, I believe, is your law partner. Is it usual to do that, or what is the rule here in the District?

Mr. FENNING. The practice in practically every case is to have an attorney appear on the records of the court as the attorney for the case, but not necessarily the attorney for the petitioner. Mr. Coldren has been referred to in some of the testimony here as acting as attorney for Doctor White. That is a mistake. In cases in which Mr. Coldren appears as attorney he appears as attorney for the case; and Doctor White, when he executes the petition, simply acts in the capacity of next friend of the beneficiary. The practice, as I have said, is to have an attorney in each case. If I am appointed committee in a case, and no attorney handles the case—if I handle the case myself—then I am entitled to, under our practice, and the auditor will allow me, additional compensation for what I have done. He will not allow me to pay myself a fee, but he will add to what would otherwise be the commission a sum equal to what I would have paid to other counsel.

Mr. SMYSER. He whips the devil around the other way?

Mr. FENNING. Is that what you call it in Ohio?

Mr. SMYSER. Yes, sir.

Mr. FENNING. Now, the trust companies all have general counsel, and I have the papers here in one or two cases where the Washington Loan and Trust Company were appointed committee and where, as soon as they were appointed committee, they paid to their general counsel, who does all of the law business of the company, a fee for conducting the lunacy proceedings.

Mr. HAY. I think the point of the criticism was not as to the fact of the employment of counsel, but the fact that Mr. Coldren was your law partner.

Mr. FENNING. I can not see how that would enter into it, Mr. Hay, or how that could be criticised, for, as I have just stated, if I did the work myself I would get additional compensation for it. I do not think it looks very well on the face of it to have an attorney who handles the case also act as committee. I think if you can bring in a disinterested man, as an attorney usually is, and have him act as counsel in the case, it shows better on the record. It does not have a cut-and-dried appearance, as you might say.

The CHAIRMAN. Does not that same condition of affairs obtain where a man's partner acts for him? I mean does it not have the same cut-and-dried appearance? I appreciate perfectly well that in New York, if I am an executor of an estate, my partner will be the attorney for the executor, but I do not see—

Mr. SMYSER. So would mine, in Ohio.

Mr. FENNING. I can not see the difference, Mr. Chairman, between Mr. Coldren acting as counsel in a case in which I am committee and Mr. Larnier, the general counsel of the Washington Loan and Trust Company, acting as counsel in a case in which the Washington Loan and Trust Company is committee.

Mr. HAY. In other words, you do not share these fees with Mr. Coldren, do you?

Mr. FENNING. Mr. Coldren gets the counsel fee and I get the commission.

Mr. HAY. But you do not share with Mr. Coldren any of the counsel fees?

Mr. FENNING. It all goes to him as counsel and all the commission comes to me as the committee.

Mr. SMYSER. Do you divide up? Do you throw it into hodgepodge and then divide?

Mr. FENNING. Mr. Coldren and I have a general partnership—

Mr. SMYSER. These fees that he gets in these cases, are they divided with you?

Mr. FENNING. All professional business done by either member of the firm is considered as firm business—yes, sir.

Mr. HAY. In whatever way it comes in?

Mr. FENNING. Yes; the professional time of each member of the firm belongs to the firm. I will say that Mr. Coldren has acted as attorney in cases in which there was no other attorney. I testified yesterday that when I took up this line of work I went to a great many attorneys and told them that when they had business of this nature requiring a fiduciary in this city and there were no responsible relatives I was prepared to act as what might be called a quasi public guardian; and so if, as has often happened, another attorney comes in to me and says, "Here is a case in which I am going to have you appointed committee," that attorney gets the fee for acting as counsel, and he not only gets the fee then, but he gets the fee in the final settlement of the estate if attorney's services are required then.

Mr. HAY. In other words, he gives you the case, with the understanding that he will do the legal work?

Mr. FENNING. That he shall continue to be counsel, yes. In a case where there are no relatives here and no known friends here and the superintendent of the hospital acts as next friend, or the agent of the Board of Children's Guardians or the agent of the Board of Charities acts as next friend, those petitions are filed and prosecuted through Mr. Coldren.

Mr. HAY. Is there anything else, Mr. Fenning?

Mr. FENNING. Right on that line, I will just say in connection with my stating my desires to the other attorneys here in the city, that that was the kind of visit I made three or four years ago to Mr. Evans. Mr. Evans has testified that I came to him and suggested that I be appointed committee in the case of an imbecile named Frank Briggs, because I knew that he was the attorney for the family, and that I went to see him once or twice about it; and then he went so far as to say on the record that I made the proposition to him to have the same kind of cooperation that I had with Mr. Coldren. That is not so. I went to see Mr. Evans because the records of the probate court showed that he represented the mother of this boy when she was his guardian.

The boy had attained the age of 21, so that the mother had no further rights as guardian in any way, and that before any further pension could be paid it would have to be paid to a committee appointed by the equity court, the authority of the probate court having ceased when the boy became 21. Mr. Evans told me that he would take the matter up with the family. Then, on a further examination of the records I found that this mother was in contempt because she had been cited two or three times to account. She had received over \$700 and had not accounted. I then went to Mr. Evans finally and told him—

Mr. SMYSER. Was she appointed guardian by reason of the minority of the boy?

Mr. FENNING. Yes.

Mr. SMYSER. And not because of the fact that he was insane.

Mr. FENNING. Yes, sir; because the fact that the boy is insane, if he is under 21 years, does not enter into it.

Mr. SMYSER. On which ground was she appointed?

Mr. FENNING. On account of his minority. We appoint a guardian of a minor, and a committee of a lunatic.

Mr. SMYSER. I understand.

Mr. FENNING. When I found that this woman was in contempt I dropped the matter, so far as Mr. Evans was concerned. The District was paying for the boy's keep over at the hospital, and if the Board of Charities could have a committee appointed, and thereby relieve the District of this weekly charge for the keep of the boy, I knew they would be anxious to do it. So the Board of Charities executed the petition upon which I was appointed committee in that case. Mr. Evans, in his second testimony here the other day, in answer to a definite question by Mr. Smyser, admitted that I never made a general proposition to him, that I never spoke to him about any particular case except the Briggs case, and he said that when I did speak to him about the Briggs case I made the remark that if he had other cases of like nature—that is, if he was attorney for families where there were lunatics or minor children needing the services of a committee or guardian—I would like to take them up. I frankly admit that I made that statement, not only to Mr. Evans, but to a very large number of other attorneys.

Now, I am a member of the bar association of this District, an organization composed of 230 lawyers in active practice, and as a member of that bar association I am answerable to the grievance committee. If at any time I have done anything improper in connection with these cases such irregularity could be reported to the grievance committee, and I would be immediately called on to answer. Now, to be sure, not a single member of the Medico-Legal Society belongs to the bar association; but that need not deter the representatives of the Medico-Legal Society from going to our grievance committee at any time if they have a grievance against any member of the bar.

The CHAIRMAN. That is exactly the rule we have in our bar association in New York.

Mr. HAY. I suppose it is the rule in all bar associations.

Mr. FENNING. Well, I want it to appear in the record.

The CHAIRMAN. It does not make any difference whether a man is a member of the bar or not. If he had a grievance against any lawyer he can go to the bar association and lay his grievance before it.

Mr. FENNING. Precisely; and I want that to appear on the record in connection with the remark that the members of the Medico-Legal Society do not belong to the bar association.

Mr. SMYSER. Has there been any criticism of your transgressing the ethics of the profession other than what has appeared in the course of this investigation?

Mr. FENNING. Absolutely none has come to my attention, and Auditor Payne, who would be the first man in the District of Columbia to hear of such a thing, testified yesterday that nothing of that kind had ever come to his attention. He is in direct personal contact with every member of the bar in active practice.

Mr. SMYSER. One of the incidents of your profession is to look after that class of business?

Mr. FENNING. Yes, sir.

Mr. SMYSER. You do it in a proper way?

Mr. FENNING. I endeavor to; yes, sir.

Mr. SMYSER. Do you yourself feel that you have transgressed the ethics of the profession?

Mr. FENNING. No, sir; I do not. I have been criticised by one or two members of the Medico-Legal Society in this proceeding, and it has been said that I have appeared in court and have endeavored to oppose habeas corpus proceedings and have thrown obstacles in the way of persons getting out of the hospital. I am frank to admit that in the Corbett case—I am the committee of Mrs. Corbett—I went into court when the habeas corpus proceeding was about to be heard and told the judge that as committee of Mrs. Corbett I had looked carefully into the case since she had filed her petition for a writ of habeas corpus, and my opinion was that the best interests of Mrs. Corbett demanded that she remain where she was, and that that being the case I was going to appear with the district attorney in opposition to the issuance of the writ.

In the Logue case the statement has been made that I have appeared in court with counsel opposing certain measures instituted in Mr. Logue's behalf. I have not appeared with counsel in the sense of my counsel in any way. I have appeared with the district attorney, who came in as counsel for the superintendent of the hospital.

The CHAIRMAN. As a matter of fact, as the committee for any lunatic, whether it be Corbett or Logue, it is your duty to instruct the court as to your opinion of that.

Mr. FENNING. I so consider it, Mr. Chairman; yes, sir. I have endeavored to treat each one of my wards in a manner that I have thought right, for their own best interests, treating each case individually and not generally. I have seemed to side with the hospital, because after an investigation, in habeas corpus cases, I have appeared with the district attorney; but I have done so only after a full investigation as to what I considered my personal obligation as committee. I may remark, in conclusion, along that line, that it seems to me the admonition given by Dr. Henry Van Dyke to the graduating class at Princeton the other day, when he suggested to them that they cast in their lot not with the destroyers but with the fulfillers, illustrates the condition in this case. I have preferred for myself and for my wards to cast in my lot with the men who have made good, and not with the destroyers.

Mr. HAY. Is there anything else you want to say?

Mr. FENNING. No, sir.

Mr. HAY. We went over the ground very thoroughly yesterday.

Mr. SMYSER. I want to ask one question. Where you prepare the papers—if such an instance occurs where you are appointed committee—you would fairly be entitled to some compensation for the legal services rendered?

Mr. FENNING. Yes, sir.

Mr. SMYSER. And that is allowed?

Mr. FENNING. Yes, sir; as additional commission.

Mr. SMYSER. It comes by way of additional compensation?

Mr. FENNING. Yes, sir.

Mr. SMYSER. Well, that is true in any fiduciary relations, the world over, is it not?

Mr. FENNING. Absolutely. I imagine it is true in Ohio.

Mr. SMYSER. I just settled up, while I was home the last time, a case in which I was administrator. I had three or four lawsuits, and the probate court fixed my compensation away beyond what the law made it, because of the legal services rendered.

Mr. FENNING. Exactly.

Mr. SMYSER. And that is the principle upon which you are compensated?

Mr. FENNING. Exactly.

#### TESTIMONY OF MISS NELLIE EDWARDS.

Miss NELLIE EDWARDS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Miss Edwards, you are employed in St. Elizabeth's, are you not?

Miss EDWARDS. Yes.

The CHAIRMAN. How long have you been there?

Miss EDWARDS. Eleven months.

The CHAIRMAN. What is your position there?

Miss EDWARDS. I am on night duty at Oaks A, 1 and 2.

The CHAIRMAN. As an attendant?

Miss EDWARDS. Yes.

The CHAIRMAN. Do you know Miss Hotchkiss?

Miss EDWARDS. Yes.

The CHAIRMAN. Was she in the institution?

Miss EDWARDS. Yes.

The CHAIRMAN. Do you know a sister of Miss Hotchkiss who visits the hospital at times?

Miss EDWARDS. Yes. I am not well acquainted with her, but I know her when I see her.

The CHAIRMAN. She has been there to see her sister in the institution?

Miss EDWARDS. Yes.

The CHAIRMAN. She testified that you and a Miss Thorne improperly treated Miss Hotchkiss, who is in the institution. What have you to say about that?

Miss EDWARDS. We were accused of it, but there was no foundation for it.

The CHAIRMAN. You never did improperly treat Miss Hotchkiss?

Miss EDWARDS. No; I never did; nor I never saw her mistreated.

The CHAIRMAN. Have you ever seen any patient under your charge that was badly treated in any way?

Miss EDWARDS. No; I have not.

The CHAIRMAN. Do you try to give them as good attention as you possibly can?

Miss EDWARDS. I do, to the best of my knowledge.

The CHAIRMAN. This sister said that you and Miss Thorne choked and beat her sister.

Miss EDWARDS. No; we never did anything of the kind.

The CHAIRMAN. What kind of a patient is this Miss Hotchkiss? Is she disturbed?

Miss EDWARDS. Yes; the greater part of the time she is an awful unruly patient.



**The CHAIRMAN.** What do you do when she is disturbed and unruly?

**Miss EDWARDS.** Well, we are as good to her as we could be. We never handle her rough or take hold of her to choke her or anything of that kind.

**Mr. SMYSER.** How did you handle her when she was disturbed?

**Miss EDWARDS.** We did nothing to her, nothing but speak to her. We do nothing to them.

**Mr. SMYSER.** No; but this particular patient, Miss Hotchkiss, if that is her name—

**Miss EDWARDS.** What is it?

**Mr. SMYSER.** When she is disturbed, how do you quiet her? How do you manage her? Do you take hold of her?

**Miss EDWARDS.** No; we never took hold of her, because it is only at times—she stayed in the yard the greater part of the time and is not on the ward. It was only that one time that she was anyway disturbed, that we had anything to do with her, and we only took hold of her and never choked or hurt her in any way. We just took hold of her to make her behave herself.

**Mr. SMYSER.** Describe that. How do you take hold of her?

**Miss EDWARDS.** Well, just take hold of her hands.

**The CHAIRMAN.** On this occasion, what was this patient doing? Was she trying to strike people or trying to strike you?

**Miss EDWARDS.** So, she attacked Miss Thorne. I was downstairs, and she attacked Miss Thorne. Then she went in and slammed the door. We opened the door and went in to her and she commenced to fight Miss Thorne, and then I took hold of her, of course. We didn't choke her or do anything of that kind to her, though. We just took hold of her to make her behave.

**The CHAIRMAN.** Did you ever have to put this Miss Hotchkiss under restraint, tie her in bed, or put her in a camisole?

**Miss EDWARDS.** No, sir; we never did. She is too large for us to do that to her.

**Mr. SMYSER.** Too what?

**Miss EDWARDS.** She is too large for us to do it, when it takes a police officer and two of the strongest men to move her from one ward to another, I don't see how it would be possible for us to illtreat her in any way—two girls of us.

#### TESTIMONY OF E. ALEXANDER.

**E. ALEXANDER,** having been duly sworn, was examined and testified as follows:

**The CHAIRMAN.** You are an attendant at St. Elizabeth's, are you not?

**Mr. ALEXANDER.** Yes, sir.

**The CHAIRMAN.** How long have you been there?

**Mr. ALEXANDER.** Fifteen years.

**The CHAIRMAN.** What ward are you in now?

**Mr. ALEXANDER.** I am in the building named east lodge.

**The CHAIRMAN.** How long have you been there?

**Mr. ALEXANDER.** About four months.

**The CHAIRMAN.** Where were you before that?

**Mr. ALEXANDER.** In Howard hall.

**The CHAIRMAN.** How long were you in Howard hall?

Mr. ALEXANDER. About four years.

The CHAIRMAN. So that since Doctor White has been superintendent you have only been in these two wards you have named?

Mr. ALEXANDER. Yes, sir. Well, I was there a few days in the building called the annex.

The CHAIRMAN. How many patients have you under your charge?

Mr. ALEXANDER. We have 41.

The CHAIRMAN. And how many attendants?

Mr. ALEXANDER. Three—four, rather.

The CHAIRMAN. Three in the daytime and one at night?

Mr. ALEXANDER. No, sir; four, and one at night.

The CHAIRMAN. Four in the day and one at night?

Mr. ALEXANDER. Yes, sir; four in the daytime and one at night.

The CHAIRMAN. Do you remember a patient there by the name of Owsley?

Mr. ALEXANDER. Yes, sir; he was over at the annex.

The CHAIRMAN. Was he one of the patients under you?

Mr. ALEXANDER. Well, I was just relieving there. I happened to be on the ward he was on.

The CHAIRMAN. But temporarily you had charge of him?

Mr. ALEXANDER. Yes.

The CHAIRMAN. How long was he in the asylum, do you know?

Mr. ALEXANDER. I don't know, but I think he has been there a year or more.

The CHAIRMAN. How often did you see him—only on this one occasion?

Mr. ALEXANDER. I saw him several times.

The CHAIRMAN. He testified that you knocked him down and that you kicked him and choked him. Did you?

Mr. ALEXANDER. Yes; I remember that statement.

The CHAIRMAN. Did you do it?

Mr. ALEXANDER. No, sir; I never done it. It was proven that I never done it by the investigation of the Doctor and the witnesses he had that saw the whole trouble.

The CHAIRMAN. Did he make complaint about you to the Doctor?

Mr. ALEXANDER. He did. In about two weeks after it happened he made a complaint. He had to be taken over to another building and locked up in a strong room until he got able to get out.

The CHAIRMAN. What was the matter with him?

Mr. ALEXANDER. Well, he had epileptic fits, and got wild. I just had to hold him to keep him from hurting anybody.

The CHAIRMAN. But you never used any more force with him than was necessary to calm him. Is that what you mean?

Mr. ALEXANDER. Yes, sir.

The CHAIRMAN. Did you ever strike a patient?

Mr. ALEXANDER. No, sir.

The CHAIRMAN. Did a patient ever strike you?

Mr. ALEXANDER. Struck at me.

The CHAIRMAN. What do you do under such circumstances?

Mr. ALEXANDER. Well, catch hold of them until they get quiet. If they are too bad we have to lock them up for a half hour or so and let them get quiet, and then let them out.

The CHAIRMAN. When you lock them up do you throw them into the room very roughly?

**Mr. ALEXANDER.** No, indeed. We just carefully put them in and close the door on them, for the spell to wear off a little.

**The CHAIRMAN.** This man Owsley said that you asked him to take a broom and sweep up the floor.

**Mr. ALEXANDER.** I know. That is all a lie. All he said is nothing but a lie. He never done a stitch of work. He is one of the meanest men that ever came into the institution. The whole medical fraternity will tell you that. They know him. He is a great bother. Nothing is mean enough for him to do or say.

**Mr. SMYSER.** You think the short cut to that is to say it is not true?

**Mr. ALEXANDER.** Yes, sir.

#### TESTIMONY OF DR. J. C. SIMPSON.

**Dr. J. C. SIMPSON,** having been duly sworn, was examined and testified as follows:

**The CHAIRMAN.** Doctor, are you connected with St. Elizabeth's now?

**Doctor SIMPSON.** No, sir.

**The CHAIRMAN.** You were there at one time, were you not?

**Doctor SIMPSON.** Yes, sir.

**The CHAIRMAN.** For how long?

**Doctor SIMPSON.** I was there for more than twenty-one years.

**The CHAIRMAN.** When did you leave there, Doctor?

**Doctor SIMPSON.** Well, I left there in 1904—in the spring of 1904.

**The CHAIRMAN.** Did you know a Mr. Temple there?

**Doctor SIMPSON.** There was a patient there, I believe, by the name of Temple.

**The CHAIRMAN.** Did you know a Mrs. Temple, his wife?

**Doctor SIMPSON.** I do not know that I would know her if I were to see her now. I presume he had a wife, but I do not recall definitely about her.

**The CHAIRMAN.** Have you any recollection whatever of her having made a complaint to you relative to the care her husband was receiving?

**Doctor SIMPSON.** No, sir; she may have done so, but I do not recall it.

**The CHAIRMAN.** This Mrs. Temple testified that her husband was suffering from consumption, and that his bed was directly in front of the door, and that he got every draft from it; that she asked whether the patient could not be moved, and that she spoke to you about it; that you said you would see about it, and that that was all the satisfaction she obtained. Do you remember the case at all, Doctor Simpson?

**Doctor SIMPSON.** No; I do not recall anything definitely about the case, Mr. Chairman, but we established a tubercular ward there for sick people, and treated them in the open air as much as possible. We built piazzas and inclosed them in glass. We kept them out night and day, very often on the piazzas, where they could get as much fresh air as possible, and no doubt her husband did get more fresh air than he would have had if he had not been suffering from tuberculosis.

**The CHAIRMAN.** And you did that—

**Doctor SIMPSON.** That was a part of the treatment of those cases.

**The CHAIRMAN (continuing).** In connection with what you considered to be the best treatment for cases of that character.

Doctor SIMPSON. Yes, sir.

The CHAIRMAN. And you think that is good treatment yet, do you not?

Doctor SIMPSON. I do; yes, sir.

The CHAIRMAN. In other words, it is generally conceded by the medical fraternity that the best treatment for tubercular cases is to give them all the fresh air they can possibly get?

Doctor SIMPSON. Yes.

Mr. HAY. You were there twenty-one years, you say?

Doctor SIMPSON. Yes; a little more than twenty-one years.

Mr. HAY. What do you think about the food out there?

Doctor SIMPSON. What do I think about the food?

Mr. HAY. Yes, sir; as to whether it was good or bad, and whether it was properly cooked. I mean the food you served to the patients.

Doctor SIMPSON. Well, I had charge of a group of detached buildings, and during the last years that I was there I was able, in a large measure, to control the character of the food and the character of the cooking in my department. I induced Doctor Richardson to build a building, a kitchen, in connection with this group of detached buildings where we prepared the food for a general dining hall that I had charge of, and where a large number of the patients were served. Then I also established a special diet kitchen in my department where the food was specially prepared for the sick. I inspected those, and I was able usually to serve the food fairly satisfactorily—very much better than it had been served previously, when it came through a long tunnel on cars, done up in tin boxes, and when it was cold and unpalatable, and all that sort of thing. During the years that I was there I tried to make improvements in my own department in the character of the cooking and the service of the food. Of course, I had nothing to do with the purchasing of supplies, and I had very little voice in the matter of what food should be purchased.

The CHAIRMAN. Were you appointed when Doctor Richardson was there?

Doctor SIMPSON. Oh, no; I went there when Doctor Godding was superintendent.

The CHAIRMAN. And you served during all of Doctor Richardson's time, and until 1904 under Doctor White?

Doctor SIMPSON. Yes, sir.

The CHAIRMAN. Do you think the preparation and service of the food was better when you left there than it was when you first went there, and during the other part of the time?

Doctor SIMPSON. When I first went there the institution was very much smaller than it was when I came away, and this group of detached buildings grew up while I was there and I was put in charge of it, and it became quite large. I think there were some seven or eight hundred men out there, with a hundred or more employees, and I really knew very little about the hospital excepting within the department for which I was responsible, and which I kept up to a certain standard that I considered satisfactory.

Mr. HAY. Who succeeded you in charge of that department?

Doctor SIMPSON. I do not know, indeed.

The CHAIRMAN. You are a practicing physician here in the city of Washington now, are you not?

Doctor SIMPSON. Yes, sir.

Mr. HAY. Is that detached group of buildings the group of buildings called the bull pen?

Doctor SIMPSON. Well, that is a very unkind name to apply to it.

Mr. HAY. But that is what it has been called here, repeatedly.

Doctor SIMPSON. Yes; I suppose it is.

Mr. HAY. That is the building inclosed in those grounds?

Doctor SIMPSON. Yes. There was a little park there that I made myself. I laid that out with the help of some of the patients and employees, and we graveled the walks and we planted trees and shrubs and put out plants and all that sort of thing and tried to beautify it as much as possible, but it was entirely detached from the rest of the grounds. The patients were more or less confined to those limits, because the class of patients that I had were largely old men, who would wander away. Then we were not a great ways from the female department, and it was necessary to keep the men away from the women. In that way those patients there were, as a rule, not allowed a parole of the entire hospital grounds. They were confined, and an ordinary parole meant inside of that inclosure, but occasionally men who were especially trustworthy were allowed the privilege of going outside and of going down by the river and around into other portions of the grounds.

The CHAIRMAN. What area does that inclosure cover, do you remember?

Doctor SIMPSON. There are a number of acres. The number I can not tell exactly. I should say there must be 4 or 5 acres of ground, possibly. The buildings take up a good deal of ground. We built a group of buildings—the Allison group—right in those grounds, after they had been made into a park, so that took up quite a portion of the ground; but there was a fair amount of recreation ground left.

The CHAIRMAN. They have arbors there?

Doctor SIMPSON. Yes; we built some summer houses.

The CHAIRMAN. It is laid out like a park?

Doctor SIMPSON. On a small scale, of course, but it was all there was in the way of grounds.

Mr. HAY. When you went away from there in 1904 did you think the department over which you presided had a sufficient number of attendants to take care of the patients properly?

Doctor SIMPSON. Well, the number was not perhaps as great as it would be in an ideal hospital, but it was enough to get on very satisfactorily and manage the patients as they happened to be classified. For instance, some of the wards had as many as 50 men, with two attendants, but as a rule they were able-bodied men who were able to go out of doors and spend most of their time out of doors, and they got on very well. I had, I think, quite a sufficient number of nurses and attendants in the sick ward up to the time I gave up my charge of the wards.

Mr. SMYSER. You say you had quite a sufficient number?

Doctor SIMPSON. Yes; I managed to keep a sufficient number of nurses and attendants to care for the patients as I thought they ought to be cared for.

Mr. HAY. You mean those who were sick?

Doctor SIMPSON. Yes. I had quite large sick wards. We built this

group of buildings out there, and it was intended to care for most of the bedridden male patients there. There was a certain number who remained on the west side, and gradually that number increased so that the hospital ward in the detached buildings would not accommodate nearly all of the sick. Then the Toner group, of course, had its own hospital wards; but we kept those wards filled up with sick men. I think there were about one hundred beds for sick people. That included the tubercular ward where the patients were not all bedridden, but where they were separated from the other patients and kept out in this hospital group.

Mr. BARCHFELD. I want to ask you a question, Doctor. When did they first take up the scientific study of pathology at the institution?

Doctor SIMPSON. They secured a pathologist there about 1883 or 1884—Doctor Blackburn. It was through me that he was secured from Philadelphia. Doctor Godding asked me to go over to Philadelphia to the University of Pennsylvania and ask them whether they had some man there who was specially interested in that line of work. I went over and I saw Prof. H. C. Wood and Doctor Tyson. They spoke of Doctor Blackburn and of the work he was doing, and they told me they thought he would be a satisfactory man if he was willing to come. I reported that to Doctor Godding and he had some correspondence with Doctor Blackburn which resulted in his coming about that time. It may have been 1885. It was shortly after I went there. I went there in 1882, and it was within two or three years, I should say, of that time—possibly less than two years.

Mr. BARCHFELD. I want to compliment you on bringing Doctor Blackburn to the institution, because I think he is one of the greatest pathologists and students of pathology in this country.

Doctor SIMPSON. He has worked conscientiously there.

Mr. BARCHFELD. Did he get the hearty cooperation and assistance of all the staff in the institution?

Doctor SIMPSON. I think so.

Mr. BARCHFELD. And he got them interested in pathology?

Doctor SIMPSON. Of course, the physicians on the staff all had their ward duties, which consumed a good deal of time; but I know they were very much interested and very much in sympathy with his work, and helped him.

Mr. BARCHFELD. The staff, as a rule, gave him all the assistance they could, all the minutiae of detail?

Doctor SIMPSON. I think so.

Mr. BARCHFELD. What do you think of St. Elizabeth's Hospital as an asylum, as a whole, in comparison with other institutions which you have had an opportunity to observe, either by articles published in magazines or from your personal knowledge?

Doctor SIMPSON. I do not know anything about St. Elizabeth's since I left there more than two years ago; but St. Elizabeth's for a good many years enjoyed the reputation of being one of the best institutions in the world.

Mr. BARCHFELD. Good.

Doctor SIMPSON. I know that it was, up to a certain time. At this time I am not able to say. I do not know, sir.

**TESTIMONY OF MISS EVALINE BEACH.**

Miss EVALINE BEACH, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Miss Beach, you are employed at St. Elizabeth's, are you not?

Miss BEACH. Not now; no, sir.

The CHAIRMAN. When did you leave there?

Miss BEACH. In April, 1905.

The CHAIRMAN. Did you resign voluntarily?

Miss BEACH. Yes.

The CHAIRMAN. How long had you been there?

Miss BEACH. I went there October 20, 1901.

The CHAIRMAN. So you had been there between three and four years?

Miss BEACH. Yes.

The CHAIRMAN. Do you remember a Mrs. Griffin, who was there in the asylum?

Miss BEACH. Yes.

The CHAIRMAN. Was she in the ward where you were?

Miss BEACH. Yes.

The CHAIRMAN. Was she a very much disturbed patient?

Miss BEACH. No, not when I saw her. I was not on the ward with her all the time, though.

The CHAIRMAN. Was it necessary at any time to fasten her in bed in any way?

Miss BEACH. Not to my knowledge.

The CHAIRMAN. You never did it?

Miss BEACH. No, nor I never saw it.

The CHAIRMAN. Did you ever have things of that kind used for any other patient?

Miss BEACH. No, sir.

The CHAIRMAN. You never had to tie patients in bed with sheets so as to keep them from falling out?

Miss BEACH. No, I never did.

The CHAIRMAN. Do you remember any accident that took place to Mrs. Griffin while you were there?

Miss BEACH. No, sir.

The CHAIRMAN. You do not remember about anything happening to her where her ribs got broken, and her nose was bruised, and her throat blackened?

Miss BEACH. No, sir; I do not.

The CHAIRMAN. Did anything of that kind ever happen while you were on that ward?

Miss BEACH. No, sir.

**TESTIMONY OF J. L. CHAPPELEAR.**

J. L. CHAPPELEAR, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Chappelear, are you connected with the asylum now?

Mr. CHAPPELEAR. No, sir.

The CHAIRMAN. You were at one time, were you not?

Mr. CHAPPELEAR. Yes, sir.

The CHAIRMAN. What did you do there?

Mr. CHAPPELEAR. I was an attendant for about three years and barber for nearly three years. I was not there quite six years.

The CHAIRMAN. When did you leave there?

Mr. CHAPPELEAR. I left there the 1st of last April—no, April a year ago, I should have said.

The CHAIRMAN. Did you voluntarily resign from the asylum?

Mr. CHAPPELEAR. Yes, sir.

The CHAIRMAN. There is a witness who has testified before us by the name of Pendleton, who testified that he saw a patient choked, and badly choked; that this patient fought you, and that an attendant by the name of Wilson said, "I will make him stand still," and that he put a towel around his neck, while he was sitting in the chair, and wrung him there. Do you know anything about that? Did you ever see any occurrence of that kind?

Mr. CHAPPELEAR. I do not remember seeing anything with which Mr. Wilson was connected at all. I remember having a pretty hard fight with a patient once that I was determined to shave, but I don't remember Wilson being there.

The CHAIRMAN. What was the patient's name?

Mr. CHAPPELEAR. Let's see if I can remember this patient's name. He was a big sailor, I know that. I don't remember exactly what his name is.

The CHAIRMAN. Was he in the barber's chair being shaved when he began to fight?

Mr. CHAPPELEAR. No, sir; I had another patient helping me to do the work, at least to lather, you know, just to get the men ready to shave. He was a good, straight patient.

The CHAIRMAN. I was going to ask you whether you let the patients shave each other?

Mr. CHAPPELEAR. This patient that was helping me tried to get him in the chair to shave him, and he jumped into this patient and struck him and blacked his eye. So I went and pulled him away and he went into me. I had the razor in my hand, and I had a pretty hard scrap with him. I got the razor in my pocket, and finally I threw him and got him on the floor and held him there. It was a pretty hard scrap, and I don't know whether he got hurt or not. I know I got several bruises—scratches.

The CHAIRMAN. This was a man you were trying to shave, you mean?

Mr. CHAPPELEAR. Yes. I don't remember the man's name. I knew it, too. I don't know whether that is the case that Mr. Pendleton was speaking of or not.

The CHAIRMAN. Was there any attendant that helped you to calm this man down?

Mr. CHAPPELEAR. No, sir; there was not.

The CHAIRMAN. When the patient attacked you, you say you had the razor in your hand, ready to shave him, at the time?

Mr. CHAPPELEAR. No, sir; I was not shaving him at the time. This patient wanted to get him ready to be shaved. So, instead of that, he had a scrap with him. At least, the other fellow was the larger man, and he was able to handle this one easy, and he jumped on him, you



know. I went to take his part—to take him off, to stop him, at least—and he and myself had it.

The CHAIRMAN. Then the fight was on. Did you hit this fellow?

Mr. CHAPPELEAR. No; I didn't hit him. I didn't have any chance to hit him. It was as much as I could do to keep him off of me.

The CHAIRMAN. In other words, two patients were fighting and you separated and calmed them down. Did you use any more force than was necessary in order to do it?

Mr. CHAPPELEAR. No, sir; I think not. I never hit him. I had to use what force I had to handle him.

Mr. HAY. How about the food out there, Mr. Chappelear?

Mr. CHAPPELEAR. Well, I don't think that I can consider the food anything extra. I have eaten some pretty good meals there and I have eaten some pretty bad ones.

Mr. HAY. What was wrong? Was it badly cooked, or what?

Mr. CHAPPELEAR. Yes, badly cooked; there is no doubt about that, but sometimes we got pretty bad beef. I don't think the cooking has anything to do with that. The beef is simply beyond eating, I think, at times. I won't say it is that way all the time. When we have roast beef or anything like fresh meat, like that, it is in pretty good shape, but the corned beef is terrible. At least, I think so. I do not claim to be any judge.

Mr. HAY. I am requested to ask you if you ever saw Mr. Pyles hit a patient?

Mr. CHAPPELEAR. Yes, sir; I have.

Mr. HAY. You have?

Mr. CHAPPELEAR. Yes, sir.

Mr. HAY. What about it? What did he hit him for?

Mr. CHAPPELEAR. I really could not say what the trouble was. He had trouble with him. I have known Mr. Pyles when he had charge of a ward, and I used to shave on there, and I have seen him several times have trouble with patients. Of course I was not connected with the ward at all, and I only went there to do my work, and Mr. Pyles—on several occasions I remember him handling the patients pretty rough, but of course I was not connected with the ward at all, and I did not bother him, or the patient either.

Mr. HAY. Which Mr. Pyles is that? Do you mean this Mr. Pyles here? [Indicating.]

Mr. CHAPPELEAR. I mean Mr. T. O. Pyles. Yes, sir; that is the only Mr. Pyles I knew there.

#### TESTIMONY OF W. I. HAWKINS.

W. I. HAWKINS, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Hawkins, how long were you in St. Elizabeth's?

Mr. HAWKINS. Two years this last June past, the 18th.

The CHAIRMAN. You left last June?

Mr. HAWKINS. I had been there two years the 18th of last month.

The CHAIRMAN. Oh, you are still there.

Mr. HAWKINS. Yes.

The CHAIRMAN. Did you ever know a patient by the name of Guerrius?

Mr. HAWKINS. No, sir.

Mr. SMYSER. Well, what do you call the Italians out there—Dagoes?

Mr. HAWKINS. Yes, sir. I don't know him.

Mr. SMYSER. Did you ever have any trouble with an Italian patient out there?

Mr. HAWKINS. No, sir; I did not, as I know of. I don't know any Italians. I know a Spaniard out there.

Mr. SMYSER. How is that?

Mr. HAWKINS. I don't know any Italian patient out there.

Mr. HAY. He says he knows a Spaniard.

Mr. HAWKINS. Yes.

Mr. SMYSER. Well, a Spaniard or an Italian or anybody else out there whose name you can not pronounce. Do you know anything about Lloyd striking him?

Mr. HAWKINS. No, sir; I never was on the ward with Mr. Lloyd.

Mr. SMYSER. Some fellow who would not take his medicine, and Lloyd brought him to the door and struck him?

Mr. HAWKINS. I don't know anything about it. I was not on the ward with Mr. Lloyd at all.

Mr. SMYSER. Mr. Pendleton says this thing occurred that I have indicated in a former question, and that it was done by Lloyd, and that a fellow named Fred Hawkins—

Mr. HAWKINS. This here is William I. Hawkins—

Mr. SMYSER (continuing). And Tom Moffett.

Mr. HAWKINS. You have the wrong man.

Mr. SMYSER. Was there a Fred Hawkins out there?

Mr. HAWKINS. Yes, sir.

Mr. SMYSER. Is Fred Hawkins red headed? [Laughter.]

Mr. HAWKINS. No, sir.

Mr. SMYSER. Well, this is the wrong Hawkins?

Mr. HAWKINS. Yes.

#### ADDITIONAL TESTIMONY OF OTIS WILSON.

OTIS WILSON, having been heretofore sworn, was recalled and testified as follows:

The CHAIRMAN. You have been here before, have you not, Mr. Wilson?

Mr. WILSON. Yes, sir.

The CHAIRMAN. Mr. Wilson, there is a man by the name of Pendleton who testified that you wrung out a patient with a towel in white ash ward, right above gray ash ward; that it was one morning when they were shaving down in the barber shop. What have you to say about that?

Mr. WILSON. Well, I don't remember that morning particularly.

The CHAIRMAN. Did you ever wring a patient out with a towel?

Mr. WILSON. Yes, sir.

The CHAIRMAN. When?

Mr. WILSON. Well, I don't remember the time when I done it.

The CHAIRMAN. Do you mean that you have done it so many times you can not remember?

Mr. WILSON. No; I don't know that I have done it so often—no

oftener than a good many of the others. It was done, though, for the want of help more than anything else. We have to do something.

The CHAIRMAN. How do you do it? What does it mean to wring a fellow out with a towel?

Mr. WILSON. You don't always have to use a towel. You can put your arm around his neck, of course. It is better than bruising a man, is it not?

Mr. SMYSER. Describe toweling. How do you do it?

Mr. PYLES. Mr. Chairman, if you will let him illustrate it——

The CHAIRMAN. Never mind; we will attend to this.

Mr. WILSON. Why, you take a towel and put it around the man's neck, to hold him.

Mr. SMYSER. You would not simply put it around his neck, would you?

Mr. WILSON. Yes; put it around his neck.

Mr. SMYSER. What sense would there be in that?

Mr. WILSON. To hold the man.

Mr. SMYSER. How?

Mr. WILSON. Hold him with the towel.

Mr. SMYSER. Would you twist it a little?

Mr. WILSON. Certainly.

Mr. SMYSER. Go on, sir; describe it. That is what we want.

Mr. WILSON. You take it and twist it until you quiet them down.

Mr. SMYSER. You sort of shut their wind off a little?

Mr. WILSON. Sometimes; if they don't behave; certainly.

The CHAIRMAN. Why do you do this?

Mr. WILSON. Simply that we have to do something to keep from being whipped, and to keep from having our keys taken away from us. I have been left on a ward oftentimes by myself, and I did not want to be killed. It is the easiest way to handle them. I did not want to break a man's jawbone, or something like that, and that is the reason I did it, sir; not that I wanted to do it.

The CHAIRMAN. How often have you done that?

Mr. WILSON. I never kept account.

Mr. SMYSER. Can you not give us an idea?

The CHAIRMAN. When was the last time you did it?

Mr. WILSON. I do not know that, sir. I could not say. It is only done when a man gets off and you have not got any help. The men do not make a practice of doing it.

The CHAIRMAN. Are you in the hospital now?

Mr. WILSON. No, sir.

The CHAIRMAN. Did you resign from there?

Mr. WILSON. No, sir.

The CHAIRMAN. Were you discharged?

Mr. WILSON. Yes, sir; I was discharged.

The CHAIRMAN. What for?

Mr. WILSON. I was accused of hitting a patient.

The CHAIRMAN. Had you hit a patient?

Mr. WILSON. Well, not then I didn't. I threw him. It was on the shaving morning. I told you about it, but I can tell you again if you want me to.

The CHAIRMAN. No, I do not want to hear the testimony over again.

Mr. BARCHFELD. You were really discharged for the very reason

that we are now investigating—cruelty and abuse at the institution to patients?

Mr. WILSON. Yes, sir; that is what I was accused of. But I didn't hit the patient that morning, although I threw him. He jumped me and I threw him. He grabbed me and I threw him. Doctor White investigated the matter and he said the man did not have a scratch on him, but owing to the way it was put to him he would have to discharge me. Mr. Carter was the man that reported me, and he said when I was leaving that he wouldn't have seen it for \$50. I told him that he ought not to have said anything about it, and he said there was others saw it and he had to report it.

#### TESTIMONY OF J. H. LLOYD.

J. H. LLOYD, who has been heretofore sworn, was recalled and testified as follows:

Mr. SMYSER. Mr. Lloyd, do you know Mr. Pendleton?

Mr. LLOYD. Pendleton? Yes.

Mr. SMYSER. What about Pendleton and Lloyd and Hawkins? Do you know Hawkins?

Mr. LLOYD. Yes, sir.

Mr. SMYSER. What about you three men putting a saddle on a patient named Kinsey?

Mr. LLOYD. I helped to perform that duty.

Mr. SMYSER. At whose direction?

Mr. LLOYD. The doctor's direction.

Mr. SMYSER. What doctor?

Mr. LLOYD. Doctor Stack.

Mr. SMYSER. When was this?

Mr. LLOYD. I don't just remember what time, for I have been away from the hospital for some time. I don't know the exact time.

Mr. SMYSER. How long have you been away?

Mr. LLOYD. I have been away one year and eight months.

Mr. SMYSER. What was the condition of affairs? Did the patient's condition require this treatment?

Mr. LLOYD. He was very much disturbed and was molesting other patients by disturbing them, you know, causing others to fight this patient, and we thought it was best to restrain this patient to keep him from injuring the patients.

Mr. SMYSER. As well as himself?

Mr. LLOYD. As well as himself.

Mr. SMYSER. That thing did occur, then, did it?

Mr. LLOYD. Yes, sir.

Mr. SMYSER. Under the direction of the doctor?

Mr. LLOYD. Yes, sir.

Mr. SMYSER. And in doing it how was it done? Was it done humanely or cruelly?

Mr. LLOYD. You have to use as much force as is necessary in order to use the appliance known as the bed saddle, which has wristlets, and which has anklets, and a strap that fastens over the chest, and similarly it is fastened to the bedstead. That requires, if the patient resists, to take him up bodily by force and hold him down there in the bed, by his arms and by his legs, until you get the straps fastened.

It requires, sometimes, all the strength of an attendant to hold one limb of one of those furious patients.

Mr. SMYSER. In doing this with Mr. Lindsay, you had to use force to do it?

Mr. LLOYD. We had to use force to do it.

Mr. SMYSER. But in using the force that you did use were you cruel and rough?

Mr. LLOYD. We could not be otherwise—that is, if I understand the word cruelty. If I understand the meaning of the word cruelty—to force a patient down against his will, and to do that using all the strength that you can maintain, in order to carry into execution the order of the physician who gave the orders for this patient to be restrained—if I understand the word cruel, it must be cruel.

Mr. SMYSER. But it was not done for the purpose of hurting the patient?

Mr. LLOYD. It was not. It was to preserve the patient against attacking others and prevent himself from injuring himself.

Mr. BARCHFELD. That is not cruelty. That is merely force.

Mr. LLOYD. Well, I would not consider it cruelty. I merely considered it the absolute force that you have to maintain in order to carry into force the order of the physician to prevent the patient from injuring himself or from injuring others.

The committee (at 3.30 p. m.) adjourned until Tuesday, June 26, 1906, at 10 o'clock, a. m.

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HOUSE OF REPRESENTATIVES, *Tuesday, June 26, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Tay, and Wallace; also, Doctor White, Mr. Evans, and others.

ADDITIONAL TESTIMONY OF P. J. MARTIN.

P. J. MARTIN, having been heretofore duly sworn, was recalled and testified as follows:

The CHAIRMAN. What is your name?

Mr. MARTIN. P. J. Martin.

The CHAIRMAN. Are you an employee at St. Elizabeth's?

Mr. MARTIN. I am.

The CHAIRMAN. What is your employment there?

Mr. MARTIN. I am a nurse there.

The CHAIRMAN. Do you know anything about this Gartrell case that was published in the Post yesterday?

Mr. MARTIN. No, sir; I received him after it, though, after what they call the brutality on my ward.

Mr. SMYSER. How soon after it?

Mr. MARTIN. I received him about half-past 1 Sunday evening, the 24th.

Mr. HAY. You mean Sunday afternoon?

Mr. MARTIN. Yes, sir; he was bruised on his back, and his jaw was bruised, and both eyes were discolored. They looked as if the blood had all settled in the eyes.

The CHAIRMAN. Did it look as if his eyes had been struck?

Mr. MARTIN. No, sir; he didn't look as if his eyes had been struck. The whites of his eyes was all bloodshot.

The CHAIRMAN. Were there bruises up around the eyebrow, and around the forehead, and underneath the eye?

Mr. MARTIN. No, sir; there was a scratch across the left side of the nose, and also a big bruise on the right cheek, right on the jaw-bone.

Mr. SMYSER. What sort of a bruise; what would it indicate?

Mr. MARTIN. It looked as if he had been struck with something, I don't know what.

Mr. SMYSER. Was the skin broken?

Mr. MARTIN. No, sir.

The CHAIRMAN. Has he been disturbed?

Mr. MARTIN. Yes, sir.

The CHAIRMAN. Since you have had him?

Mr. MARTIN. Yes, sir; this morning we went into his room, and we found he had a piece of tin that he had broken from a comb case. I asked him what he was going to do with the tin and he said he was going to cut his throat with it.

The CHAIRMAN. Has he any cuffs on now, or the camisole, or anything of that kind?

Mr. SMYSER. No camisole; he has cuffs on.

The CHAIRMAN. You mean those leather cuffs?

Mr. MARTIN. Yes, sir.

Mr. HAY. Did you know anything about this patient before this occurrence?

Mr. MARTIN. I received him when he first came in. That was the 4th day of April, 1906.

Mr. HAY. You received him when he first came into the hospital?

Mr. MARTIN. Yes, sir.

Mr. HAY. What sort of state was he in then?

Mr. MARTIN. He seemed to be pretty rational for the first few hours he was in there. Afterwards he got very much disturbed.

Mr. HAY. What was the character of his disturbance?

Mr. MARTIN. He would want to come around and fight the other patients.

Mr. SMYSER. He would want to do what?

Mr. MARTIN. He would want to come around and fight the other patients, and try to harm them. On one occasion I was sitting in the reception room, and he ran along down the ward stating that he was going to kill that old son of a so and so. I said: "Who do you mean?" He said: "That old man in the corner." As quick as a wink he grabbed a rocking chair and started for him. I had to take it away from him.

Mr. HAY. How long had he been under your care when he was placed in the ward where this occurred?

Mr. MARTIN. He was transferred from my ward about a month afterwards into Beech Ward.

Mr. HAY. What was his condition when he was transferred from your ward? Had he improved?

Mr. MARTIN. Yes, sir; he had improved.

The CHAIRMAN. How long has he been in the institution?

Mr. MARTIN. Since the 4th of April last.

Mr. HAY. You say his condition had improved?

Mr. MARTIN. It had improved at that time.

Mr. HAY. After he went from your ward, you do not know anything about him until you received him again?

Mr. MARTIN. Yes, sir.

The CHAIRMAN. How long was he under you?

Mr. MARTIN. About a month.

The CHAIRMAN. Were there any other occasions on which you had to control him during that month?

Mr. MARTIN. No, sir.

Mr. SMYSER. Was he apparently improving?

Mr. MARTIN. Yes, sir.

Mr. SMYSER. You received him the other night about half-past one?

Mr. MARTIN. No, sir; I did not.

The CHAIRMAN. He said the other day.

Mr. MARTIN. I said Sunday, the 24th, about half-past one. That was after dinner.

Mr. SMYSER. Had you seen him during that day, up to that time?

Mr. MARTIN. No, sir.

Mr. SMYSER. Where were you?

Mr. MARTIN. I am in another ward. This happened on Retreat 1.

Mr. SMYSER. And he was sent over to your ward?

Mr. MARTIN. Yes, sir. I am on the receiving ward, B 1.

Mr. SMYSER. Had he mind enough to give any sort of an intelligent narration of how he incurred these injuries?

Mr. MARTIN. He did not, sir. When he came to my ward I examined him to find out what bruises there were on him. I said: Mr. Gartrell, how did you get them?" He said: "They beat me up last night." I said: "What was the trouble?" He said: "Why, two men were sitting out in the corner of the hall and I jumped out of my bed and jumped onto one of them." And he said: "I struck him, and if the other man hadn't come in, I would have killed him."

Mr. SMYSER. Who were these two men?

Mr. MARTIN. I don't know who they were. I supposed they were Mr. Thorne and Mr. Cowhig.

Mr. SMYSER. Have you not tried to find out who these two men were?

Mr. MARTIN. No, sir; that is left to the doctors.

Mr. SMYSER. Well, not all of it. Did you not take any steps to ascertain, so that you could tell us who these two men were?

Mr. MARTIN. That is who they are—Mr. Cowhig and Mr. Thorne.

Mr. SMYSER. But you say you supposed so. Are they the men?

Mr. MARTIN. I couldn't say that.

The CHAIRMAN. They are the night attendants on the ward that he was on?

Mr. MARTIN. Yes, sir.

The CHAIRMAN. They are the only attendants there?

Mr. MARTIN. Yes, sir; at night.

Mr. SMYSER. How old a man is this man?

Mr. MARTIN. You mean Gartrell?

Mr. SMYSER. Yes.

Mr. MARTIN. I don't know. I guess he is about 35.

The CHAIRMAN. Is he a big fellow?

Mr. MARTIN. He is a good stout man.

## ADDITIONAL TESTIMONY OF F. J. HAWKINS.

F. J. HAWKINS, having been heretofore duly sworn, was recalled and testified as follows:

The CHAIRMAN. Mr. Hawkins, where are you an attendant? On what ward?

Mr. HAWKINS. I was an attendant on Gray Ash at one time. I am on Retreat 2d now.

The CHAIRMAN. Are you a night attendant?

Mr. HAWKINS. Day.

The CHAIRMAN. What do you know about this Gartrell occurrence?

Mr. HAWKINS. I know this: He was on the ward two nights and one day with me. He is a very mean man, very treacherous. On several occasions I had to take spittoons away from him to keep him from hitting other patients. I sent him to the douche room, and sent two men with him. One attendant came back with his lip cut, and I said, "How did that happen?" He said, "Gartrell struck me and cut my lip."

The CHAIRMAN. How many times did you have trouble with Gartrell?

Mr. HAWKINS. Gartrell was a man that was simply looking for trouble all the time on my ward.

Mr. HAY. How much time was he under you?

Mr. HAWKINS. Wait a minute. He came like this evening and stayed next day, and next morning at half-past 8, I think, I sent him to the douche room.

Mr. HAY. Is that the only time you know anything about him?

Mr. HAWKINS. That is the only time.

Mr. WALLACE. Was he a soldier?

Mr. HAWKINS. He claimed to be a soldier—let's see—he was a sailor. He claimed to be on the *Maine*. That is what he told me the morning he came there.

Mr. WALLACE. He was one of the survivors of the *Maine*?

Mr. HAWKINS. Yes, sir; that is what he said.

The CHAIRMAN. How many times did you have trouble with him during the two days you had him?

Mr. HAWKINS. I had to keep a close eye on him—the attendants and myself—all the time. On several occasions, as I said, I took spittoons away from him to keep him from hitting other patients.

The CHAIRMAN. During that time?

Mr. HAWKINS. During that time. On several occasions I had to take spittoons away. He was very treacherous toward the patients and other attendants there.

Mr. SMYSER. How did you know he was going to use the spittoons on them?

Mr. HAWKINS. He told me he was going to use them.

Mr. HAY. Was he under you when he first came into the hospital?

Mr. HAWKINS. No, sir; he was not under me.

Mr. HAY. How long had he been in the hospital when he came under your care?

Mr. HAWKINS. I couldn't exactly say. I can only say about the time he was with me on my ward. I don't exactly know how long he had been in the hospital.



Mr. HAY. How long ago has it been that he was under you?

Mr. HAWKINS. I think it was some time in April.

Mr. HAY. What time?

Mr. HAWKINS. Let's see. It must have been somewhere about the latter part of April—some time about the 16th or 17th; along there. I won't say positively, because I couldn't make a positive statement as to what days and dates he was there. It was somewhere along that time.

Mr. HAY. Where did he come from when he was transferred to your ward?

Mr. HAWKINS. He came from Beech ward.

Mr. SMYSER. You speak of him being a treacherous man. Do you mean by that that the impulse comes on him to do injury to somebody?

Mr. HAWKINS. Yes, sir.

Mr. SMYSER. Owing to his mental condition?

Mr. HAWKINS. Yes, sir.

Mr. SMYSER. That is what you meant?

Mr. HAWKINS. I mean to say that the man is a treacherous man. This man would pick up a spittoon, and he would be just as apt to pitch it at anybody else's head; he don't care. He don't pick out any particular one—whichever he came across.

Mr. HAY. Do you know anything about this particular instance that is now under consideration?

Mr. HAWKINS. This particular instance?

Mr. HAY. Yes.

Mr. HAWKINS. Indeed I don't, sir.

#### ADDITIONAL TESTIMONY OF GEORGE B. THORNE.

GEORGE B. THORNE, having been heretofore duly sworn, was recalled and testified as follows:

The CHAIRMAN. You are a night attendant over at St. Elizabeth's?

Mr. THORNE. Yes, sir.

The CHAIRMAN. What ward?

Mr. THORNE. Retreat 1.

The CHAIRMAN. Were you there last Sunday night or Saturday night?

Mr. THORNE. I was.

The CHAIRMAN. What do you know about this man Gartrell?

Mr. THORNE. Why, the incident that occurred; this fellow Cowhig, I had placed him at the door to keep an eye on him; and he run out on Cowhig and attacked him while I was at the other end of the hall. It is a pretty long hall, and I didn't know anything about it for quite a while, until after they had a right smart scrap.

Mr. SMYSER. Speak a little louder, will you?

The CHAIRMAN. Did you see Cowhig attack Gartrell?

Mr. THORNE. No, sir; they were fighting when I got up there. I heard them hollering.

The CHAIRMAN. What did you do?

Mr. THORNE. Why, I assisted Mr. Cowhig.

Mr. SMYSER. What did you do?

Mr. THORNE. I grabbed him; I got hold of him.

The CHAIRMAN. You grabbed Gartrell?

Mr. THORNE. Yes, sir; I took hold of him. There was nothing else left for me to do.

The CHAIRMAN. How did you take hold of him? Describe it in detail.

Mr. THORNE. To the best of my knowledge, why, I run in under him and threw him.

The CHAIRMAN. You threw him?

Mr. THORNE. Yes; to the best of my knowledge. I don't hardly exactly know what did happen at the time. A person can not realize in what position they are placed in until they are in that position, and I tell you a man can hardly remember what did occur.

The CHAIRMAN. When you came up to separate the attendant and Gartrell, were they on the floor?

Mr. THORNE. No, sir.

The CHAIRMAN. Did Gartrell have hold of this attendant?

Mr. THORNE. Yes, sir; he did.

The CHAIRMAN. How?

Mr. THORNE. He had hold of his arm, to the best of my knowledge, as I remember it. He had both shirts torn off.

The CHAIRMAN. He had what?

Mr. THORNE. He had both shirts torn off of Cowhig?

Mr. WALLACE. What did the attendant have hold of? What sort of a hold did he have?

Mr. THORNE. I think he had hold of his neck.

The CHAIRMAN. You say Gartrell had torn both shirts off of the attendant?

Mr. THORNE. Yes, sir.

Mr. HAY. Were you present when this thing began?

Mr. THORNE. No, sir.

Mr. HAY. Do you know what Gartrell did, or do you know what Cowhig did?

Mr. THORNE. I only know what Cowhig told me.

Mr. WALLACE. You do not know which tore the shirts, do you?

Mr. THORNE. Yes, sir; I know.

Mr. WALLACE. How do you know that?

Mr. THORNE. Well, because it was Cowhig that had his shirts off; and I didn't imagine he would have torn his own shirts off of him.

The CHAIRMAN. Did you ever have any trouble with this man Gartrell before?

Mr. THORNE. No, sir; not direct, you understand. We had lots of trouble in watching him. He has made several threats.

The CHAIRMAN. Threats to do what?

Mr. THORNE. To kill us both and to kill himself.

The CHAIRMAN. Did you ever have to restrain him with these camisoles or with the wristlets?

Mr. THORNE. No, sir; I had not.

Mr. SMYSER. When you came onto the fracas, had he received a blow or anything on the face, about the eyes?

Mr. THORNE. They were both bleeding at that time.

Mr. SMYSER. Both of whom?

Mr. THORNE. The patient and the attendant.

Mr. SMYSER. Did you see any bruise on his cheek?

Mr. THORNE. No, sir.

Mr. SMYSER. On the patient's cheek?

Mr. THORNE. No, sir; not to my knowledge.

Mr. SMYSER. When you came onto the scene, what did you see about his eyes?

Mr. THORNE. I couldn't describe them. I never taken particular notice.

Mr. SMYSER. You can tell whether they were injured or not, can you not?

Mr. THORNE. Why, I think so. I didn't notice any injury; only there was one bleeding, and I forget which it was. There was some blood in the corner of his eye.

Mr. HAY. After the thing was over and after the patient had been subdued, what was his condition then? Did he have any bruises on his face?

Mr. THORNE. I didn't notice any. I didn't notice any the next morning.

Mr. HAY. What did you do with him after he was subdued?

Mr. THORNE. We put him into a strait-jacket.

Mr. HAY. How long did you keep it on him?

Mr. THORNE. I left it on him next morning.

Mr. HAY. Until the next morning?

Mr. THORNE. No; I left it on him next morning at 6 o'clock.

Mr. HAY. You put it on at what hour?

Mr. THORNE. I put it on about half-past 9.

Mr. HAY. At night?

Mr. THORNE. Yes, sir.

Mr. HAY. And it remained on him all night?

Mr. THORNE. Yes, sir.

Mr. HAY. And you did not take it off the following morning?

Mr. THORNE. No, sir.

Mr. HAY. Under whose orders did you put the strait-jacket on him?

Mr. THORNE. Why, I had orders when he first came over there that if he tried to injure himself to put this jacket on him.

Mr. HAY. From whom did you have those orders?

Mr. THORNE. I got it from the head attendant on the ward.

Mr. HAY. It has been testified here that it was a rule that no strait-jacket or mechanical restraint of any kind should be placed on any patient without the direct orders of the physician in charge.

Mr. THORNE. He had received such orders, as I understood.

Mr. HAY. Are you the head attendant?

Mr. THORNE. I am at night.

Mr. HAY. You are at night?

Mr. THORNE. Yes, sir.

Mr. HAY. Under the rules and regulations of the hospital was it not your duty to have communicated at once with the physician in charge at that time?

Mr. THORNE. Not in that case.

Mr. HAY. So you are given authority, then, in your discretion, to use mechanical restraints in certain cases without communicating with the doctor? Is that correct?

Mr. THORNE. That is the only case that I ever got such orders.

Mr. HAY. And you say you never had any trouble with this man before?

Mr. THORNE. No, sir. As I said before, we had to keep a very close eye on him.

Mr. SMYSER. Why?

Mr. THORNE. Because he had planned to injure us and also to injure himself.

Mr. HAY. When did you communicate with the physician in charge about this matter?

Mr. THORNE. Just as soon as I could get away from him.

Mr. HAY. Did he come?

Mr. THORNE. He did.

Mr. HAY. When he came what did he do?

Mr. THORNE. He looked at him. He came later on; he didn't come direct.

Mr. HAY. How soon after it did he come?

Mr. THORNE. I couldn't say.

Mr. HAY. Two hours, three hours, or what?

Mr. THORNE. It was something less than four hours.

Mr. HAY. What did he say then?

Mr. THORNE. He looked at him. He was asleep at the time.

Mr. HAY. Did he then say that the camisole or strait-jacket was to be kept on him?

Mr. THORNE. No, sir.

Mr. HAY. He did not?

Mr. THORNE. No, sir.

Mr. HAY. Did he say anything about that?

Mr. THORNE. No, sir.

Mr. HAY. Did he ask why that had been done?

Mr. THORNE. No, sir.

Mr. HAY. Did he order that it should be taken off at any time?

Mr. THORNE. No, sir.

Mr. HAY. You say you left it on the following day. How long during the following day did it stay on?

Mr. THORNE. I left it on at six o'clock, when I went to bed.

Mr. HAY. You went to bed at six o'clock?

Mr. THORNE. About half-past six.

Mr. HAY. It was on when you went to bed. You do not know when it was taken off?

Mr. THORNE. It was on when I left the ward.

Mr. HAY. Did you examine the man after the fracas was over to see whether he was injured in any other place except on the face?

Mr. THORNE. No, sir.

Mr. HAY. Did he complain of any other injury?

Mr. THORNE. He was asleep when I left him.

Mr. HAY. But immediately after the fracas, before he went to sleep, did he make any complaint of anything hurting him?

Mr. THORNE. No, sir.

Mr. HAY. You say you saw some blood, but you don't know whether it was on Cowhig or on Gartrell?

Mr. THORNE. It was on both.

Mr. HAY. Do you know from whom it came?

Mr. THORNE. No, sir; I do not. They both had scratches on them.

Mr. HAY. In other words, they had a fight, did they?

Mr. THORNE. Yes, sir.

Mr. HAY. Did you see Cowhig hit Gartrell?

Mr. THORNE. No, sir; I did not.

Mr. HAY. How soon after the fracas began did you see it?

Mr. THORNE. I judge from the time that I had left that part of the ward, about four or five minutes.

Mr. HAY. They had been fighting four or five minutes before you got to them?

Mr. THORNE. I don't know how long it was. He attacked him after I left the place.

Mr. HAY. Do you know whether he attacked him at all or not, except from what Cowhig told you?

Mr. THORNE. No, sir; I just had his word for it.

Mr. HAY. You just took Cowhig's word for it?

Mr. THORNE. Yes, sir.

Mr. HAY. You say you told Cowhig to keep his eye on him?

Mr. THORNE. I did; to go there——

Mr. HAY. For that purpose?

Mr. THORNE. Yes, sir.

Mr. HAY. Why was it done on that particular night, or did you always do it?

Mr. THORNE. Because he had broken a broomstick and had it in his pants that day.

Mr. HAY. During the day?

Mr. THORNE. Yes, sir; he also had had rockers off of a chair in his mattress a day or so before that.

Mr. HAY. Owing to these facts that had been reported to you, I presume, by the persons on duty during the day, you thought he ought to be carefully looked after, and you put Mr. Cowhig there to see after him. Is that the idea?

Mr. THORNE. Yes, sir.

Mr. WALLACE. And when you first got there you presumed it was your duty to help the attendant instead of the patient?

Mr. THORNE. I did; yes, sir; the way things looked at that time.

Mr. WALLACE. To put it in plain language, you lit into the patient, did you?

Mr. THORNE. Yes, sir.

Mr. WALLACE. A sick crazy man; and an able-bodied, clear-minded man, were in a difficulty?

Mr. THORNE. Yes, sir.

Mr. WALLACE. And you considered it your duty to take the part of the attendant?

Mr. THORNE. I did.

The CHAIRMAN. In other words, you got them separated so that Gartrell would not injure the attendant; is that it?

Mr. THORNE. Yes, sir; I assisted Cowhig.

Mr. WALLACE. Did you think that Cowhig was injuring Gartrell about as much as Gartrell was injuring the attendant?

Mr. THORNE. No, sir; I did not.

Mr. WALLACE. Is not that your general way of thinking about these things anyway?

Mr. THORNE. No, sir.

Mr. WALLACE. When you get to a difficulty of that kind, you first take hold of the patient, do you not?

Mr. THORNE. If there is no other way out of it.

Mr. WALLACE. Suppose there was a strong, clear-minded man beating a patient. Then what do you do?

Mr. THORNE. I would stop him.

Mr. WALLACE. You would take hold of him then, would you?

Mr. THORNE. I would; yes, sir.

Mr. WALLACE. And you never saw who started the fight?

Mr. THORNE. No, sir; it was started while I was in another part of the ward.

Mr. WALLACE. When you took charge of this patient, did that other man hit him?

Mr. THORNE. Not to my knowledge. They was all mixed up there.

Mr. WALLACE. And you say you threw the patient on the floor?

Mr. THORNE. Yes, sir.

Mr. WALLACE. What did you do with the other man?

Mr. THORNE. I let him take care of himself.

Mr. SMYSER. Did you mistreat the patient in any way?

Mr. THORNE. No, sir; I did not. I handled him the best I could under the circumstances. We was not handling eggs, and that is a fact. We had to handle him rougher than what we cared to.

The CHAIRMAN. Did you handle him any rougher than was necessary to prevent him doing any further injury to himself or anybody else?

Mr. THORNE. Not to my knowledge. Not to my belief.

Mr. WALLACE. Did you strike him?

Mr. THORNE. No, sir.

Mr. SMYSER. From what you had known of him previously, his conduct, and the fact that he was engaged in a scrap with the attendant, what do you say as to the restraint that you resorted to to protect the patient? Was it reasonable or not?

Mr. THORNE. It was reasonable.

Mr. WALLACE. How do you know who started the scrap?

Mr. THORNE. I don't know.

Mr. WALLACE. Then why do you say it was reasonable?

Mr. THORNE. Because I know of the condition——

Mr. WALLACE. You got there after the fight had been going on for some time?

Mr. THORNE. Yes, sir; but then I knew of the threats the patient had made. It was my opinion that he should have been put under restraint before.

Mr. WALLACE. You do not give a patient a reasonable doubt, then?

Mr. THORNE. I do.

Mr. WALLACE. You do?

Mr. THORNE. Yes, sir.

Mr. WALLACE. I do not see it from your testimony.

Mr. THORNE. Well, you don't understand the case.

Mr. WALLACE. Maybe not.

Mr. THORNE. No, sir.

Mr. WALLACE. I want to see if you understand it——

Mr. THORNE. It was an extraordinary case.

Mr. WALLACE (continuing). And can make us understand it. That is what I want. You say you got there in the midst of the fight.

Mr. THORNE. Yes, sir.

Mr. WALLACE. And you took hold of the patient and helped the other attendant do him up.

Mr. THORNE. I helped——

The CHAIRMAN. He did not testify to that.

Mr. WALLACE. Or stretched him out, or took hold of him, or something of that kind.

Mr. THORNE. I helped him to subdue him.

Mr. WALLACE. What did you do to subdue him?

Mr. THORNE. We had to take hold of him and throw him and hold him.

Mr. WALLACE. Both of you?

Mr. THORNE. Yes, sir; and we had our hands full at that.

Mr. WALLACE. You threw him on the hard floor?

Mr. THORNE. Yes, sir; I wasn't particular about picking a place out, at a time like that.

Mr. WALLACE. You could not hold a man up off of the floor just then, either, could you—two of you?

Mr. THORNE. No, sir; he was pretty able to stand himself about that time.

Mr. HAY. Who else was present?

Mr. THORNE. No one.

The CHAIRMAN. There were some patients around, were there not?

Mr. THORNE. Yes, sir; and another patient. He came in afterwards, some time after we had the scrap.

Mr. HAY. Where did this occur, then; in a ward?

Mr. THORNE. In a ward.

Mr. HAY. How many patients were on that ward?

Mr. THORNE. Thirty-eight.

Mr. HAY. Where were they? In their rooms?

Mr. THORNE. Yes, sir.

Mr. HAY. It is a ward in which they have separate rooms, is it?

Mr. THORNE. Sir?

Mr. HAY. It is a ward in which they have separate rooms for the patients?

Mr. THORNE. Well, there is two or three dormitories, with four or five beds.

Mr. WALLACE. Did you have a bed in that room?

Mr. THORNE. Yes, sir; a mattress.

Mr. WALLACE. Did you subdue him on the floor or on the bed?

Mr. THORNE. It was a mattress. I didn't pick the place.

Mr. WALLACE. You did not put him on the mattress, but on the floor?

Mr. THORNE. We put him down wherever we could get him.

Mr. SMYSER. Why did you not take him to get the mattress, so that if it was necessary to throw him, to subdue him, he could alight easily?

Mr. THORNE. We didn't have the time.

Mr. WALLACE. But was there not a mattress there?

Mr. THORNE. Yes, sir.

Mr. WALLACE. You did not have to take time to get the mattress?

Mr. THORNE. No, sir.

Mr. WALLACE. You sought to subdue him by throwing him on the floor instead of on the mattress?

Mr. THORNE. I didn't pick the floor.

Mr. WALLACE. But that is where he landed, is it not?

Mr. THORNE. I am not certain. Probably he was partly on the mattress and partly on the floor.

Mr. HAY. What was the name of the patient who was present?

Mr. THORNE. Levyson.

Mr. HAY. What character of patient is he?

Mr. THORNE. He is a very quiet patient.

Mr. HAY. What is the character of his disease?

Mr. THORNE. Well, I don't know, sir.

Mr. HAY. Is he a man who knows what is going on, and what is being done, and so on? Has he any mind at all?

Mr. THORNE. Yes, he has.

Mr. HAY. He has?

Mr. THORNE. Yes, sir.

Mr. HAY. Can he reason?

Mr. THORNE. Well, I don't know. I never had much talk with him. You see, he is usually in bed at the time I go on duty, and he is in bed when I go off.

Mr. HAY. How did he happen to come in?

Mr. THORNE. He heard——

Mr. HAY. He heard the disturbance?

Mr. THORNE. Yes, sir.

Mr. HAY. Was this man Gartrell in this room by himself?

Mr. THORNE. Yes, sir; he was in a room by himself.

Mr. HAY. What was the attendant Cowhig doing in that room?

Mr. THORNE. He was trying to subdue him when I seen him.

Mr. HAY. Did you station him in the room or at the door?

Mr. THORNE. No, sir; right across the hall from his room.

Mr. HAY. The door was open, was it?

Mr. THORNE. Yes, sir.

The CHAIRMAN. You told him to watch this patient because you thought this patient was a dangerous one?

Mr. THORNE. Yes, sir.

Mr. SMYSER. When you used the word fight, did you mean the kind of scrap that two fellows who are not in a lunatic asylum engage in? Do you use it in that sense? Like they used to have down in Virginia, for instance?

Mr. THORNE. I suppose so.

Mr. SMYSER. That is, they were both willing to fight. Is that what you mean?

Mr. THORNE. Yes, sir—well, I couldn't say about that; no, sir.

Mr. SMYSER. When you got there and saw the fracas——

Mr. THORNE. They were both pretty well engaged.

The CHAIRMAN. Were they clinched?

Mr. THORNE. Yes, sir.

The CHAIRMAN. And was the patient getting the better of the attendant?

Mr. THORNE. I thought so; yes, sir.

#### TESTIMONY OF D. COWHIG.

D. COWHIG, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. You are a night attendant over at St. Elizabeth's?

Mr. COWHIG. Yes, sir.

The CHAIRMAN. And you are one of the attendants in this ward where Gartrell was, are you not?

Mr. COWHIG. Yes, sir.



The CHAIRMAN. Did Gartrell have a private room—a separate room?

Mr. COWHIG. Yes, sir.

The CHAIRMAN. Tell us all you know about that trouble last Sunday, will you?

Mr. COWHIG. Well, it happened about—when he started on me he jumped on me unknowing. I was sitting in a chair, like I am now, and he jumped right on me and struck me. He struck me right there [indicating] and scarred me, and he struck me right here [indicating]. He said: “I am going to kill you.” That is what he said, and I done the best I could to manage him if I could. I had to choke him. I choked him. I had my hand right here [indicating], and that is the only hold I had on him. He tore both of my shirts off, and he said: “I am going to kill you.” So I done all I could to keep him off of me.

The CHAIRMAN. How big a man is he?

Mr. COWHIG. He is pretty large; a little bit larger than me.

Mr. SMYER. Is he as big as I am?

Mr. COWHIG. Well, now, I couldn't tell you exactly.

The CHAIRMAN. You say that when you were sitting in a chair he jumped on you?

Mr. COWHIG. Yes, sir.

The CHAIRMAN. And struck you twice?

Mr. COWHIG. He struck me twice.

The CHAIRMAN. And you caught hold of him to try and keep him off of you?

Mr. COWHIG. Yes, sir; I reached right up and caught hold of him right in the throat.

The CHAIRMAN. You did not have any conversation with him before?

Mr. COWHIG. No, sir; I was just as good to him as could be. Every night at 12 o'clock I gave him a glass of milk, which he called for, and a sandwich. I was just as good to him as could be. He jumped on me unknowing, and said he was going to kill me.

The CHAIRMAN. Where were you; in the room with him?

Mr. COWHIG. No, sir; I was out in the hall, watching him, right in front of his room.

The CHAIRMAN. Had you known him to be a difficult patient to handle before?

Mr. COWHIG. Yes, sir.

The CHAIRMAN. Had there ever been any occurrence of this kind previous to that?

Mr. COWHIG. Well, no, sir; but he made right smart threats, though. He made threats to kill Mr. Thorne, and kill me, too. He said he was going to knock both of us in the head and get the keys and go out of there. He made them threats a good deal of times.

Mr. WALLACE. Did he approach you from behind?

Mr. COWHIG. I can not understand you there.

The CHAIRMAN. Was your back turned to him?

Mr. COWHIG. No, sir; I was sitting just like in front of him, as I am now—just like you are up there now. I had my head down this way [indicating] reading a card. I wasn't thinking, when he jumped out of the room on me, when he run on me and struck me. I was in a chair in the corner, and couldn't get up for a right smart while. When I got up I caught him right here by the throat [indicating].

The CHAIRMAN. Was he getting the better of you?

Mr. COWHIG. Yes, sir; he was getting the best of me all the time, and then I had to holler for Thorne. He was away down in the alcove.

The CHAIRMAN. Did you strike him; did you hit him back?

Mr. COWHIG. No, sir; I didn't hit him. He struck me twice, unknowing, and he jumped on me.

Mr. SMYSER. Why did you not strike him?

Mr. COWHIG. I couldn't strike him because he had me fastened so that he had the advantage of me. But I wouldn't have hit him. I grabbed him right by the throat. That is the only hold I could get.

Mr. SMYSER. What did you take him by the throat for?

Mr. COWHIG. That is the only chance I could get on him; to hold him off of me. I couldn't do anything, because he had me. He had my shirt all tore off from here across front [indicating], and he had both of my hands fastened.

The CHAIRMAN. What did you do after Thorne came in and assisted you and you got the man quiet? Did you report it to the doctor then?

Mr. COWHIG. Yes, sir; we reported it to the doctor.

The CHAIRMAN. By telephone?

Mr. COWHIG. Yes, sir.

The CHAIRMAN. What doctor?

Mr. COWHIG. I reported it to the doctor when he came through—Doctor Fitch. I told him that I choked him; that I had to do it; that he threatened to kill me.

The CHAIRMAN. Did the doctor come in and look at the fellow then?

Mr. COWHIG. Yes, sir.

The CHAIRMAN. Was he asleep at the time?

Mr. COWHIG. He was asleep; yes, sir.

The CHAIRMAN. Had you put this camisole on him at that time?

Mr. COWHIG. The strait-jacket; yes, sir; me and Mr. Thorne put the strait-jacket on him, and it was as much as we could do to get it on him, too. I don't think there is any man in here that could handle him by himself.

The CHAIRMAN. You do not think what?

Mr. COWHIG. I don't think there is a man here that can handle him by himself. He is as treacherous a patient as I ever saw in my life.

The CHAIRMAN. Did you use any more force than was necessary to keep him from seriously injuring you?

Mr. COWHIG. No, sir; I just kept him off of me.

The CHAIRMAN. What was his condition after you got him in the strait-jacket and got him in bed? How was he? Was he bruised?

Mr. COWHIG. No, sir.

The CHAIRMAN. Well, he had some cuts on his face, did he not?

Mr. COWHIG. Well, he had a little cut right here [indicating], a little bit. It was a little gash—just a scratch in the corner of his eye.

The CHAIRMAN. Were his eyes badly bloodshot?

Mr. COWHIG. No, sir.

The CHAIRMAN. Was he bruised here on the jaw [indicating]?

Mr. COWHIG. No, sir.

Mr. WALLACE. Is it not a fact, when you threw him, as you say, that you got away from him the best you could and by any means you could?

Mr. COWHIG. Yes, sir.

Mr. HAY. How long have you been at the hospital?

Mr. COWHIG. Going on seven months—at the asylum.

Mr. HAY. Sir?

Mr. COWHIG. I have been working at the asylum about seven months.

Mr. HAY. Have you been all that time where you are now?

Mr. COWHIG. No, sir.

Mr. HAY. What were you doing before you were on this ward?

Mr. COWHIG. I was on Gray Ash a while—about four days—and I was transferred on to Garfield first, and I stayed there, I suppose, about four months.

Mr. HAY. You have been on this ward ever since Gartrell has been on it, have you not?

Mr. COWHIG. I have been on another ward—B 2. I was on that ward, I suppose, a month, or, maybe, a little over a month. I don't remember.

Mr. HAY. How long has Gartrell been on this ward under you?

Mr. COWHIG. Under me?

Mr. HAY. Yes, sir.

Mr. COWHIG. I couldn't tell you exactly.

Mr. HAY. Have you any idea of it?

Mr. COWHIG. Well, I suppose about a little over a month, I reckon.

Mr. HAY. During that time were you warned by Mr. Thorne or by anybody else with regard to Gartrell being a dangerous man?

Mr. COWHIG. Sir?

Mr. HAY. Were you warned by the physician or by Mr. Thorne or by anybody else as to the fact that Gartrell was a dangerous man?

Mr. COWHIG. Yes, sir; I was told he was right dangerous.

Mr. HAY. Who told you?

Mr. COWHIG. Well, different attendants told me.

Mr. HAY. Who?

Mr. COWHIG. Well, Mr. Holmes and the other attendant out here—I forget his name.

Mr. HAY. Was Mr. Holmes in charge of him during the day?

Mr. COWHIG. He was his ward there once.

Mr. HAY. He was at one time on his ward?

Mr. COWHIG. Yes, sir.

Mr. HAY. Who was in charge of him during the day on this ward?

Mr. COWHIG. On this ward?

Mr. HAY. Yes, sir.

Mr. COWHIG. Well, let me see—Mr. Teates.

Mr. HAY. Did Mr. Teates ever tell you anything about him?

Mr. COWHIG. No, sir.

Mr. HAY. He did not? Well, now, I understand you did not report this case, when it happened, to the physician in charge, but waited until he came through on his regular round. Is that what you said a moment ago?

Mr. COWHIG. Yes, sir; I reported to the doctor when he came through.

Mr. HAY. You did not telephone to him?

Mr. COWHIG. No, sir; Mr. Thorne telephoned him.

Mr. HAY. And he came how soon?

Mr. COWHIG. I suppose it was about 11 o'clock.

Mr. HAY. About 11 o'clock?

Mr. COWHIG. Yes, sir.

Mr. HAY. And when did this occur?

Mr. COWHIG. This occurred about a quarter after nine.

Mr. HAY. Did you have any orders from the physician in charge to put a strait-jacket on him when you put it on him?

Mr. COWHIG. No, sir.

Mr. HAY. You did not? You were told to do that by Mr. Thorne, were you not?

Mr. COWHIG. Yes, sir; we had to do it.

Mr. HAY. Mr. Thorne is over you, is he?

Mr. COWHIG. Yes, sir.

Mr. HAY. Well, Mr. Cowhig, when this man made this assault on you, as you have described, how soon did you see him? Did you see him before he struck you?

Mr. COWHIG. No, sir; I did not see him. He run right out on me.

Mr. HAY. You were placed there particularly by Mr. Thorne a few minutes before that, were you not?

Mr. COWHIG. Yes, sir.

Mr. HAY. To take particular care of this man?

Mr. COWHIG. Yes, sir.

Mr. HAY. How was it that he was able to come up on you in that way when you were put there in front of his door for the purpose of looking after him?

Mr. COWHIG. Well, I didn't think he was going to run out on me like that at all. I never had no idea of it. I was sitting just like I am now, right in front of him. I was reading a card that I had in my hand, and I was not thinking that he was going to do such a thing.

Mr. HAY. Did he have anything in his hand?

Mr. COWHIG. No, sir.

Mr. HAY. Did he have a broomstick?

Mr. COWHIG. No, sir.

Mr. HAY. Or anything at all?

Mr. COWHIG. No, sir; nothing but his fist.

The CHAIRMAN. He just jumped on you and struck you unawares, did he not?

Mr. COWHIG. Yes, sir; he run right up and struck me twice while I was sitting down. I had my head down this way [indicating] reading a card. He tried to kill me.

Mr. WALLACE. He struck you with his fist about the head?

Mr. COWHIG. Yes, sir; right there and right there [indicating]. He tried to kill me.

Mr. WALLACE. He did not knock you out of the chair, did he?

Mr. COWHIG. No, sir; he couldn't knock me out, because I had my back leaning right against the corner.

The CHAIRMAN. Did you ever hear of this man Gartrell striking anybody before, besides yourself?

Mr. COWHIG. No, sir; I have not.

The CHAIRMAN. Did he ever, in your presence, make any attempt, except on this occasion, to either strike you, or a patient, or Thorne, or anybody else?

Mr. COWHIG. Well, I think he had a broomstick. He broke a broomstick off and had it in there, and he brought it in to knock Mr. Knight, the day attendant, in the head.

Mr. HAY. How do you know that?

Mr. COWHIG. Mr. Knight told me.

Mr. HAY. You did not know about it yourself?

Mr. COWHIG. No, sir; only just what he told me, and he is out here now.

Mr. HAY. What other patients were there? Was there another patient there?

Mr. COWHIG. No, sir.

Mr. HAY. Did any of them come from where they were when this was going on?

Mr. COWHIG. No, sir.

Mr. HAY. Did any of them come up afterwards?

Mr. COWHIG. No, sir.

Mr. WALLACE. Nobody came to your help?

Mr. COWHIG. I hollered for Mr. Thorne when he was getting the best of me.

Mr. WALLACE. What did Mr. Thorne do?

Mr. COWHIG. Mr. Thorne was away down in the lower end of the alcove, changing men.

Mr. WALLACE. Did he come up there?

Mr. COWHIG. Oh, yes, sir.

Mr. WALLACE. What did he do when he got there?

Mr. COWHIG. We put him in a strait-jacket.

Mr. WALLACE. I say, what did Thorne do when he got there?

Mr. COWHIG. When he got there?

Mr. WALLACE. Yes, sir.

Mr. COWHIG. Why, he helped me. He was getting the best of me, and he helped to hold him.

Mr. WALLACE. I thought Mr. Thorne said you were getting the best of him awhile ago?

Mr. COWHIG. I was getting the best of him?

Mr. WALLACE. Yes.

Mr. COWHIG. No, sir; if I was doing that, I wouldn't have called Mr. Thorne.

Mr. WALLACE. Did Mr. Thorne hit him?

Mr. COWHIG. No, sir; I didn't see him hit him.

Mr. WALLACE. What did he do?

Mr. COWHIG. He didn't do anything to him.

Mr. SMYSER. What did he do?

Mr. COWHIG. We just put him in the strait-jacket after he came there.

Mr. SMYSER. How in the name of God did he get him in the strait-jacket without doing something to him? What did Thorne do?

Mr. COWHIG. He helped to hold him.

Mr. SMYSER. How?

Mr. COWHIG. He held his hands.

Mr. SMYSER. With his teeth, or with his feet, or how? Can you not tell what he did by way of helping you take charge of this man?

Mr. COWHIG. He grabbed him and held him while I put a strait-jacket on him.

Mr. WALLACE. Where did he grab him? Where did he put his hands?

Mr. COWHIG. Where did he put his hands?

Mr. WALLACE. Yes.

Mr. COWHIG. Mr. Thorne?

Mr. WALLACE. Yes. You say he grabbed him. Where did he put his hands?

Mr. COWHIG. He grabbed him by his hand.

Mr. WALLACE. Did he not grab him by his throat, too?

Mr. COWHIG. Not as I know of.

#### TESTIMONY OF K. F. KNIGHT.

K. F. KNIGHT, having been duly sworn, was examined and testified as follows:

Mr. SMYSER. Mr. Knight, you are an attendant out at St. Elizabeth's?

Mr. KNIGHT. I am.

Mr. SMYSER. How long have you been there?

Mr. KNIGHT. About fifteen months.

Mr. SMYSER. Do you know Gartrell?

Mr. KNIGHT. Yes, sir.

Mr. SMYSER. How long have you known him?

Mr. KNIGHT. Let's see; about three months, I think, I knew him.

Mr. SMYSER. He is in your ward?

Mr. KNIGHT. Not now; no, sir.

Mr. SMYSER. Was he last Sunday?

Mr. KNIGHT. Yes, sir; he was on my ward about ten days.

Mr. SMYSER. Are you a day or night attendant?

Mr. KNIGHT. I am a day attendant.

Mr. SMYSER. On Saturday what time did you come off duty?

Mr. KNIGHT. At 8 o'clock at night.

Mr. SMYSER. During Saturday did you see anything of Gartrell?

Mr. KNIGHT. Yes, sir; in the day.

Mr. SMYSER. What was his condition?

Mr. KNIGHT. He was all right when I went off duty.

Mr. SMYSER. How was he during the day as to being violent, or anything of the kind?

Mr. KNIGHT. Yes, sir.

Mr. SMYSER. How did he exhibit his violence?

Mr. KNIGHT. During the day, Saturday, he threatened to kill me—I think it was Saturday—with a broomstick. He had a broomstick.

Mr. SMYSER. Did he have a stick?

Mr. KNIGHT. Yes, sir.

Mr. SMYSER. Did he come at you?

Mr. KNIGHT. No, sir; but he told the other attendants on the ward that he was going to kill me.

Mr. SMYSER. Did he tell you?

Mr. KNIGHT. No, sir.

Mr. SMYSER. You say he had a stick. Where did he get it?

Mr. KNIGHT. He broke a broomstick in half.

Mr. SMYSER. What time in the day was that?

Mr. KNIGHT. It was in the afternoon, about 1 or 2 o'clock.

Mr. SMYSER. With that knowledge, did you say anything to the succeeding attendant about this man and his condition?

Mr. KNIGHT. How is that?

Mr. SMYSER. Did you make that known to the attendant who succeeded you?

Mr. KNIGHT. We had one man with him—a special attendant with him—in the day time.

Mr. SMYSER. Who?

Mr. KNIGHT. Byers—Mr. P. A. Byers.

Mr. SMYSER. Who succeeded you after you went off duty?

Mr. KNIGHT. Mr. Thorne and Mr. Cowhig, the two night attendants.

Mr. SMYSER. Did you say anything to them about this man's disposition to be violent?

Mr. KNIGHT. Yes, sir.

Mr. SMYSER. Did you say anything to them?

Mr. KNIGHT. Yes, sir.

Mr. SMYSER. The fracas you do not know anything about, do you?

Mr. KNIGHT. No, sir; that happened in the night while I was off duty.

Mr. SMYSER. When did you see Gartrell again?

Mr. KNIGHT. Next morning at 6 o'clock.

Mr. SMYSER. Where?

Mr. KNIGHT. In bed; but he was very quiet next morning when I went on the ward. He was asleep.

Mr. SMYSER. Did you learn what had been done?

Mr. KNIGHT. Yes, sir.

Mr. SMYSER. Did you examine him?

Mr. KNIGHT. I examined him; yes, sir.

Mr. SMYSER. What did you find?

Mr. KNIGHT. His eyes were pretty red next morning, and he had one bruise right down the side of his face here [indicating].

Mr. SMYSER. What sort of a bruise?

Mr. KNIGHT. It was kind of blue.

Mr. SMYSER. You are not a doctor, I suppose, and you can not tell whether that came from a blow or something else?

Mr. KNIGHT. No, sir.

Mr. SMYSER. Was the skin broken?

Mr. KNIGHT. No, sir; not where the bruise was.

Mr. SMYSER. Did the eyes have the appearance of having been injured by a blow, or how were they?

Mr. KNIGHT. No; they just looked red.

Mr. SMYSER. You have no idea how that redness came about—or are they always that way?

Mr. KNIGHT. No, sir; they wasn't that way when I went off duty. The redness wasn't.

Mr. SMYSER. Was there any cut about the eyes—

Mr. KNIGHT. No, sir; there was not a cut.

Mr. SMYSER. Above or below?

Mr. KNIGHT. No; it was just red like blood, around his eyes.

Mr. SMYSER. Do you regard him as a dangerous man?

Mr. KNIGHT. Yes, sir.

Mr. WALLACE. Was he making those threats continuously?

Mr. KNIGHT. Yes, sir.

Mr. WALLACE. Such threats as that?

Mr. KNIGHT. Every day; yes, sir.

Mr. WALLACE. Had he ever hurt anybody before that?

Mr. KNIGHT. Yes, sir.

Mr. WALLACE. When?

Mr. KNIGHT. A patient over at B Building, he struck with a broom-stick back of the head.

Mr. WALLACE. Do you know any of the history of this man?

Mr. KNIGHT. No, sir.

Mr. WALLACE. You do not know who he was, nor where he came from?

Mr. KNIGHT. No, sir; he came from Washington out there, I believe.

Mr. WALLACE. Was he not a soldier?

Mr. KNIGHT. Yes, sir.

Mr. WALLACE. Was he not one of the survivors of the Maine disaster?

Mr. KNIGHT. Yes, sir.

Mr. WALLACE. Down at Habana?

Mr. KNIGHT. Yes, sir.

Mr. WALLACE. What was the matter with him?

Mr. KNIGHT. How is that?

Mr. WALLACE. What was the matter with him? Do you know?

Mr. KNIGHT. No, sir.

Mr. HAY. When you saw him at 6 o'clock did he have on the strait-jacket?

Mr. KNIGHT. He had on the strait-jacket; yes, sir.

Mr. HAY. How long did that stay on after you saw him?

Mr. KNIGHT. It remained until half past 9, I think, as near as I can judge.

Mr. HAY. It was taken off by whose orders?

Mr. KNIGHT. We taken it off when his brother came over to see him.

Mr. HAY. Did the physician in charge see him before half past 9 o'clock?

Mr. KNIGHT. No, sir.

Mr. HAY. Did you report the case to the physician in charge at 6 o'clock when you came on?

Mr. KNIGHT. No, sir; I didn't notice him when I first went on duty at 6 o'clock in the morning. He was very quiet.

Mr. HAY. When did you first hear that he had had this trouble during the night?

Mr. KNIGHT. When I came in at about 10 o'clock Mr. Thorne told me he had had some trouble with him, that he attacked Mr. Cowhig.

Mr. HAY. So you heard about it the evening before that?

Mr. KNIGHT. That night; yes, sir; but he did not say whether he was bruised in any way.

Mr. HAY. Did you find any bruises anywhere else on him except on the face?

Mr. KNIGHT. He had some scratches on the body, but he did that about a week previously.

Mr. HAY. Did he not have any bruise on his back?

Mr. KNIGHT. No, sir; I didn't see any.

Mr. HAY. Did you examine his back?

Mr. KNIGHT. No, sir; I didn't examine his back.



**ADDITIONAL TESTIMONY OF DR. ALFRED GLASCOCK.**

Dr. ALFRED GLASCOCK, having been heretofore duly sworn, was recalled and testified as follows:

The CHAIRMAN. Doctor, tell us what you know about this Gartrell case, will you?

Doctor GLASCOCK. This patient, William M. Gartrell, was admitted to the institution on April 4 last. He was a sailor, one of the survivors of the Maine disaster, and I understand from the medical history that his trouble originated in the line of duty, and was caused by the shock and the hard service at that time—the time of the Spanish war.

The CHAIRMAN. How did he come to your institution?

Doctor GLASCOCK. He was admitted by orders of the honorable Secretary of the Navy. He came in from the Naval Hospital of this city. He was admitted from the Naval Hospital. He was quiet on admission, but it was quite evident that there was marked mental deterioration. He was quite happy and contented. He spoke of his great desire, I think, several hours after his admission, to do a great deal of good in the world. He wanted to take all of the old men in the hospital and put them in automobiles and take them out to a new home he was going to originate out in Maryland at his uncle's estate. He was then going to found an institution for orphans; and in a short while he had so many ideas that it was impossible to keep track of them; so many and various were his wives. He was going to be married, and the jewels of his wife were going to exceed those of Miss Roosevelt. He had delusions of grandeur, as we call them, at the time, which are frequently present in mental trouble; but we placed his trouble as an organic disease—paresis.

It is one of the incurable diseases, and in a short time, usually within two or three years, and sometimes much sooner, it ends in death. I saw the patient's brother, I think, the day of his admission, and I of course told him at that time that I could tell him nothing about his brother's condition aside from the fact that he was quiet. I think a week after that I saw his brother. The patient had then become disturbed. In the meantime I had had many opportunities of observing him and studying his case, and I thought he was suffering from this organic disease. I told his brother I thought the disease was incurable, and that in a short while he would become bedridden and it would terminate fatally; that I could give him no hope of recovery. About the end, I think, of the first week, or about the tenth day, he began to get irritable. Prior to that time he was quite amiable. He began to get quite irritable because he could not go to town and go home, and he became morose. He wanted to get out; he said he simply had to get out, and he broke down in tears and wept and became irritable and morose. Then he became disturbed and tore up his bedding.

He tore up the mattress into strips, and piled the contents of it in the middle of the room. He tore up his clothes. He tore up everything in the way of clothing into strips. During the day he spoke about his various wives, and said that everything around him he owned and that the furniture was of gold, etc. Then he improved to some extent mentally, but the mental deterioration was still quite

pronounced. However, he became quiet, and was not controlled by his ideas to any great extent. He was then transferred to Beech Ward, but he only remained there two days when he became excited and disturbed. Then he was transferred to Gray Ash Ward, and remained on Gray Ash, I think, several days. The second morning he was taken to the douche room. He was given the douche-room treatment.

While there he suddenly struck the attendant who took him there in the mouth and cut his lip. The attendant came to me and I had to take three stitches in his lip. Then we transferred him back to the B building, in the ward just above his former ward on which he was admitted. His condition became worse. He became more disturbed. Sometimes we would find under his pillow a screw that he had taken from the bed; and he was making threats occasionally. He made one statement that the Lord had commanded him to kill all the children in the world, and that he was going to go through the world and kill all the children.

He then had some peculiar ideas. He had a delusion about his eyes, that his eyes were made of glass, and he didn't like them and was going to take them out and put jewels in; and I think several days after that he became quite disturbed and morose and depressed because he was confined, and he suddenly struck himself. The attendant rushed to him to try and hold him. He swore he was going to tear out his eyes, and he gouged at his right eye and made a severe bruise. The eye was very much swollen, and there was a slight wound at the corner of the eye. He was then restrained by sheets, in bed. Then for several days, for periods of a few hours each, he was restrained in bed by sheets. When we allowed him to get up he would immediately go back to tearing up the sheets and bedding.

I think it was on the 7th of June when I was in the ward in the afternoon, and I saw the patient sitting down quite quiet, at the time, out on the porch. There was a little imbecile boy there; a little harmless fellow. We call him a boy. He is 20 years of age, but his mind is like that of a child of 10. He was sitting out on the porch talking to a visitor. I went into the medicine room to give some orders, and I heard a blow, and then a scream from this boy, which I recognized. I heard two blows. I rushed out and Gartrell had broken a broom handle over the boy's head. The first blow broke the broom, and then, I understand, he grabbed the broken piece and struck him again. The blows cut to the bone, in both instances, and laid open the scalp to the skull, each cut being 4 or 5 inches long. There was quite a good deal of hemorrhage. The boy suffered a good deal, and suffered from severe headache for quite a number of hours after that. This patient told me he was commanded by God to do that, and if the attendants had not got to him in time he would have killed him.

He was then put in a room. He had become quiet, and he broke down and wept, and said he would never do such a thing again. Then he was transferred to Retreat 1. Retreat 1 is a ward where we have a great many old, bedridden patients. He had been a disturbing element on his ward, and we were afraid that some trouble might occur that would be more serious than that. So we put him on this ward, with absolutely demented, bedridden patients, where he could not in any way annoy the men, and where he would not be

going round talking to and irritating them with his various nonsensical ideas. There, the second night after he was admitted to that ward, the attendants thought he was asleep, but they discovered that he had made a rope out of torn-up sheets. This rope was quite an ingenious thing, a beautiful rope. He made it out of torn-up strips, and had it fastened to the bed. He swore he was going to attempt suicide. He had made a noose in it. He was then watched for the rest of the night.

Two days after that, in some way, he got hold of a pin, and he went down to the closet and scratched himself from head to foot, with deep scratches, all over the body. The outer layer of the skin of the hand was almost scratched off. He said he was vaccinating himself. Those scratches remain to this day.

Then he became more irritable. In the meantime his brother had been most anxious to take him out on the lawn. His brother came to see me on several occasions. He impressed the fact upon me that he was thoroughly satisfied with his brother's treatment, and he seemed appreciative. He wanted to know if he could take his brother out on the lawn for a little walk. I told him I was afraid—that I knew his brother would enjoy being out under the trees—but I was afraid when he wanted to take him back to the ward he would not want to come but would want to accompany him as he wanted to go home; that I was afraid he might create a disturbance and might attack his brother.

I kept putting him off. The patient was most anxious to go out day after day, and he made all sorts of threats. His mind at this time was deteriorating very rapidly. Just a few days ago he told me that the night before he took out the top of his skull and the little monkeys jumped out and danced on his shoulder. I think it was last Saturday afternoon that his brother called me up on the phone and asked me if he could take the patient out for a walk the next morning. I told him then that I saw no reason why he could not if the patient was quiet; that he had been quiet for the past few days, and had been making no trouble outside of some threats that he made there.

I said, "You must remember that your brother has made these right along." I had impressed his brother with the fact frequently that his brother was in this condition, and that we could not tell how serious an outbreak he might have next time. I told his brother that he was a dangerous man, and that we feared he might do some serious harm to himself or some serious harm to others. I told his brother of the occasion when he had struck the attendant in the mouth, and when he struck the boy over the head, and his brother seemed very sorry for that.

MR. WALLACE. Now, Doctor, when that man told you he had the direction of God to do an ungodly thing, did you not know then was the time to take care of him?

DOCTOR GLASSCOCK. We were taking care of him to the best of our ability?

MR. WALLACE. And to keep him away from other people?

DOCTOR GLASSCOCK. It is impossible to watch a man absolutely all the time, and to keep your eyes on a man every minute of the twenty-four hours. It is impossible to do that. This man at times was quiet. This man at times was as gentle as a child; and during those

intervals, perhaps, there was some laxity of watchfulness, when we did not suspect he was going to do any harm. But this man was exceedingly sly and treacherous, I might say, to a certain extent, at times—decidedly treacherous.

Mr. WALLACE. Have you any attendants closely watching him all the time?

Doctor GLASSCOCK. Yes, sir; during the past two weeks, I can say, an attendant has been watching him nearly all the time during the twenty-four hours; but sometimes the patient may go down to the closet, to attend to the calls of nature, and the attendant might stand outside of the door. I think on that occasion is when he scratched himself.

Mr. Gartrell, as I started to say, on Saturday afternoon last, was quiet, and I told his brother he could go out in the morning; that I would see him, and if he was quiet he could take him out on the lawn. I invariably go to the ward before 10 o'clock every morning. Of course I visit the hospital ward first. It is the nearest to me, and after having breakfasted I go to that first, the main ward, where they have the most severe cases—suicidal cases, etc. Our sickest patients are in that building.

So I go to it first, and it is sometimes about 10 o'clock before I finish the ward, and sometimes later. I then go to the Retreat ward. Sunday morning is usually a very busy morning, and I do not usually get to the Retreat until a little later, after I finish the main ward work. Sunday morning I understood that his brother wished to see me, and I went out and saw him. He asked me if he could see his brother. I said: "I will 'phone over to the ward and find out how your brother is. I have not had an opportunity to see your brother, but as soon as I can I will see him later in the morning. I will 'phone over and find out how he is, and if he is quiet I will give you an attendant to accompany you out on the lawn with him."

I had to go to the Administration Building to attend to some duties there. Mr. Gartrell went to see his brother, and after the board meeting, or rather the staff meeting, that we hold Sunday morning about 12 o'clock, I came down and he was waiting to see me. He was upset, nervous, and angry, and told me that an attendant had told him his brother had been violently beaten the night before by two night attendants and that he wanted the matter immediately investigated. I said: "I will accompany you right now. We will go to the ward and see the patient ourselves, and I will look over him with you." We went there and saw the patient. He was sitting out in the hall. He was dressed and quiet. He had been crying, as it is quite customary for him to do. In fact, every day he has a weeping spell.

I saw there was a slight hemorrhage, as we call it, beneath the outer coating of the eye. The white part of the eye was red in each eye. There was no bruise around the eye and no evidence of any blood in the eyes. There was a slight swelling on the right side of jaw, and it was slightly blue. I took off the patient's clothes. I stripped him, and Mr. Gartrell, his brother, pointed out a scar. I told Mr. Gartrell that the great majority of those were injuries that he had inflicted himself with the pin, and he said: "Yes, they are; I see that." He had some slight marks, scratches around his throat, but no contusions. I do not think the skin was broken, and they were very slight, around each side of the neck.

**Mr. WALLACE.** Could you tell how that had been done?

**Doctor GLASSCOCK.** Perhaps with the fingers; I do not know. They might have occurred before that. He had quite a number of slight bruises about him. On several occasions during the past two or three weeks he had struck himself. It is impossible to tell, absolutely, how those occurred. I might say that when I saw him about 5 o'clock and examined him to see if there were any broken ribs, he said: "Doctor, my ribs have been broken, but I put it back in place. I took out a piece and put it back again." There was a tender spot on the right side, but I could not detect any fractured ribs. I saw no other bruises, but his body was covered with numerous small scratches that he had made with the pin. The night report, which I will have to refer to, stated that at 9.15 o'clock Gartrell rushed from his room and attacked Mr. Cowhig. Mr. Thorne called to his assistance a patient by the name of Levyson, a quiet sailor we have on the ward.

He is anxious to do some work, and he goes down on the ward to assist in making up the beds and fixing up the ward. I never knew him to do any harm to anyone. The patient is in such a condition that in the near future, perhaps, he may be discharged from the institution as recovered. The night report further stated that the camisole had been put on. It has been stated here that it was a strait-jacket. We haven't any strait-jacket.

**Mr. WALLACE.** What is the difference between a camisole and a strait-jacket?

**Doctor GLASSCOCK.** I have never seen a strait-jacket. I understand it is a heavy piece of leather, in the form of a cylinder, which goes down over the patient's arms, which are bound down to the sides, so that the arms can not be moved in it. The arms are bound to the sides. It is made of leather, I think, or stout canvas.

**Mr. WALLACE.** You say the terms camisole and strait-jacket have been used interchangeably, so I thought we should know exactly the difference.

**Doctor GLASSCOCK.** A strait-jacket I have never seen.

**Mr. WALLACE.** Will you describe the camisole?

**Doctor GLASSCOCK.** It has been described, I believe, here. It is made of canvas tenting. It is a jacket; it is short. It goes around here [indicating], and it laces up the back with gauze strings. It has long sleeves. The sleeves extend beyond the hands a foot. The patient's arms are crossed this way [indicating], and the sleeves come around in the back and are tied. The patient has the free use of his arms and can move them backward and forward. The fingers are not restrained in any way. That is the camisole, as we call it, the canvas jacket.

I immediately called up each attendant who was on duty at the time and asked them if they knew anything of this occurrence. Mr. Knight, who has testified this morning, told me when he came on duty Mr. Cowhig showed his torn shirt, and told him the patient had attacked him in the night, and the fight had occurred, and that the three of them restrained him in the jacket. Doctor Fitch ordered a quieting dose of medicine for him, and he slept throughout the remainder of the night. That was about half-past 9, I presume, and he was quiet during the rest of the night. He slept.

Mr. WALLACE. I would like to ask you another question about the strait-jacket.

Doctor GLASSCOCK. The strait-jacket, I do not believe, has ever been used there; certainly not in recent years. I have never seen one in the institution, and I do not believe it has been in use in other years in the institution.

Mr. WALLACE. How do you explain, then, that both of the attendants call it a strait-jacket?

Doctor GLASSCOCK. It is a term they have gotten hold of. It is a common term, and they have held to that idea. It is an erroneous impression that all of them receive there. It is commonly spoken of as a strait-jacket.

Mr. WALLACE. When did you commence calling it a camisole out there?

Doctor GLASSCOCK. That I could not tell you exactly—within the last year or so, or the last several years. I could not tell you exactly. I do not know myself.

The CHAIRMAN. Has it not always been called a camisole?

Doctor GLASSCOCK. I believe I must have called it myself, at one time a strait-jacket, I don't know.

Mr. WALLACE. Has it not been recently, then, that it has been called a camisole?

Doctor GLASSCOCK. Perhaps this investigation has had something to do with that.

Mr. HAY. You say that Doctor Fitch gave him a soothing medicine at half past 9 o'clock?

Doctor GLASSCOCK. I do not know exactly. I believe it was a little later than that; half past 9 or a little later.

Mr. HAY. One of the attendants testified that Doctor Fitch came at a quarter past 11, I believe, and the other testified that he came in about four hours.

Doctor GLASSCOCK. I think, perhaps, they were so nervous that they did not give a correct idea of it at the time.

The CHAIRMAN. From the investigation that you made, do you think those attendants were guilty of any unduly rough conduct toward the patient?

Doctor GLASSCOCK. I do not think so. I have perfect confidence in Mr. Cowhig. I understand he is a man of good habits. I have always believed him to be a gentleman, and quiet, and for that reason he was picked out for that ward. He is a new man, comparatively, and we picked him out for that ward, to go on night duty, because we consider him a particularly honorable, quiet, and gentle man. Such a thing as Cowhig jumping on a man and kicking him in the face and kicking him in the ribs, as Mr. Gartrell, the patient's brother, claims and as the patient claimed at the time, seems to me to be inconceivable. I do not understand it. Mr. Cowhig, as soon as I questioned him, did not hesitate to acknowledge that he grabbed him at the throat, but he considered that what he was doing was in self-defense.

The patient, as I have been told this morning, had made numerous threats against him, and had been secreting about his person various articles with which he could do harm to others, and I presume the man may have believed that he had something in his hand. At times we have found him with bolts, big screws, that he had taken from the

bed and placed under his pillow. The dormitory is only dimly lighted. We try to subdue the light as much as possible at night, and this patient was at the time in his room, as I understand, as the evidence was given to me. The story they gave me was the story they have given here this morning.

Mr. WALLACE. Did you find those things yourself—those big screws and things?

Doctor GLASSCOCK. Yes; I was on the ward on one occasion when the nurse reported it and brought it to me.

Mr. WALLACE. It was brought to you?

Doctor GLASSCOCK. Yes; quite a little while ago.

Mr. WALLACE. You never found one in his room or on his person?

Doctor GLASSCOCK. No; they have been shown to me, and, as I say, it is to me inconceivable why Cowhig should maliciously jump upon a man, as Gartrell's brother claims he did. I have myself fully believed the patient to be a dangerous man, and to be a treacherous man, and I believed then and I believe now that the man was defending himself; that he saw himself in a dangerous position at the time, as you may all readily see, and the attendant became frightened, and he must have been quite excited.

He must have been quite a good deal excited at the time, and there may have been some blows. The attendants, possibly, can not give a correct idea of it, because the patient was fighting desperately. When he does fight, he fights most desperately. It is a hard matter to put the camisole upon a patient. One man has to hold one arm while the other has to put the hand in one sleeve; and the patient will bite, kick, and fight. The statements of the patient as regards this assault have been varied since then. Just yesterday he said he got in one of his maniacal attacks. I asked him what was the matter with his eyes, and he says, "there is nothing the matter with them."

I said, "yes, there is; they are all red." He said, "those eyes ain't no good. They are made out of agate." He said, "I am going to take them out and get new ones." Then he said, "I got them by two attendants." He said, "I got mad with them and jumped the two attendants." The next time the story was that the attendants jumped him, and the next time he denied absolutely that any trouble had happened. His statements can in no way be relied upon; but his brother was most firmly convinced that his statements were true.

#### TESTIMONY OF MISS MARY MARTIN.

Miss MARY MARTIN, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Miss Martin, are you an employee in St. Elizabeth's?

Miss MARTIN. Yes, sir.

The CHAIRMAN. How long have you been there?

Miss MARTIN. About three years.

The CHAIRMAN. What ward are you in now?

Miss MARTIN. I am on Retreat first.

The CHAIRMAN. Is that the ward where this man Gartrell is?

Miss MARTIN. He is not there at present. He was there until Sunday.

The CHAIRMAN. How long was he under your care?

MISS MARTIN. Well, I was on B 3 for about two weeks—two or three weeks, I don't know which. Then we were transferred to Retreat first, and we were on Retreat first a couple of weeks before he was transferred over there. I think he was transferred onto Retreat first about the 7th of June, if I am not very much mistaken—the 7th or 8th—somewhere around there. I don't know exactly what date it was.

THE CHAIRMAN. From the 7th of June up until recently he was with you?

MISS MARTIN. Yes.

THE CHAIRMAN. What sort of a patient was he?

MISS MARTIN. I think he was a very violent patient. He had every delusion and hallucination that it is possible for a patient to have. He was homicidal and suicidal, both.

I have heard him numerous times threaten to kill different persons, and he had an idea that he could send messages by wireless telegraphy and many different means and call on his brothers or some relative to come and see him. They were expected to be there in such a space of time, and if they did not come he would say he would kill them, and he often came to me and asked for a knife or scissors or an instrument of some sort to kill them when they did come. Very often he would ask me for a bandage to hang himself. On several occasions I saw him strike different patients and attendants—I don't know just how often. Last Saturday he was sitting in the office with me. He used very often to stay there and talk to me.

We have a number of solutions and poisons and instruments and such things, and it is quite dangerous to have him there; but he never showed any violence to me. Mr. Knight, one of the attendants, came along one time and thought it was rather dangerous for me to have him there, and told him to stay outside of the office. The office is partitioned off from the rest of the ward by a wire grating. He told him to stay outside of the office, and he became perfectly violent. At times he would think I was his sister, and sometimes his mother or his wife, and just about that time he happened to think I was his wife; so he became very indignant to think that Mr. Knight, the attendant, stopped him from talking to me. He told me he would kill him. A few minutes after the dinner bell rang and we went to the dining room to serve the dinner, and when I came back he had a broomstick.

He went down to the cupboard and found a broom and he broke the handle off. He showed it to me, and whispered to me that he would crush his skull as soon as he saw him. He asked me not to tell him. He said when he came to the office he would crack his skull with the broomstock. Numerous times previous to that I had heard him say when persons would say or do things that he wouldn't like that he would get his children to hurt them. So I said, "You had better let your children hurt him, and you not hurt him at all; because if you do you will be kept here so much longer, and you will not get out."

He said, "Do you think the children will hurt him?" I said, "Yes; I am certain they will." He said, "Very well," he would not hurt him, but he would let the children do it. So Mr. Byers came along, one of the attendants that usually looked after him—he had a special attendant with him the greater part of the time—so when



he came I said, "Give the stick to Mr. Byers; let him have it." He said, "Very well, if you think my children will come and do away with him, I will let Mr. Byers have the stick." I said, "I am sure they will." He said, "Very well." So, a few hours after he came and said, "I am very glad I gave the stick up, because I was going to kill him. I fully intended to do it."

About half-past 7 Monday morning he had the strait-jacket on. I went to the room and said, "Mr. Gartrell, what is the matter?" He said, "Last night I had a mad attack and I ran at the night nurse and wanted to hurt him, but he got the best of me." I said, "Did he hurt you?" He said, "Yes; and I hurt him. I was going to kill him, but he hurt me. He got the best of me." When I saw him his face was a little swollen and his eyes looked as if he had been crying. One side of his face—I don't know whether it was the left or the right side—I can't recollect which side it was that was the most swollen, but one side was more so than the other.

On numerous occasions I have known Mr. Gartrell to threaten to kill persons, and to commit suicide himself. About two weeks ago, I think, he took a buckle off of his trousers and scratched his entire body from head to foot, as many places as he could scratch with the buckle. He also took a safety pin and scratched his arms and chest. They were badly scratched. Several times I have seen him run against the wall and knock his head against the wall with great violence and force. I have also seen him close his fist and beat himself around the face and body, and about three weeks ago I saw him beat his face until it was black and blue, and very much discolored.

The CHAIRMAN. Why did not some attendant stop him?

Miss MARTIN. He stopped him as soon as he could. I could not stop him, but I would call one of the attendants and they would come. I never saw an attendant hurt him. Many times he has come to me and asked for scissors to cut pictures out of the papers and magazines. I always allowed him to do that, although I never thought it was exactly prudent to give him the scissors; but to please him and get along I always indulged him as much as possible, but I never saw him ill used by anyone; I never did.

#### ADDITIONAL TESTIMONY OF DR. ARTHUR C. FITCH.

Dr. ARTHUR C. FITCH, having been previously duly sworn, was recalled, and testified as follows:

The CHAIRMAN. Doctor, tell us what you know about this Gartrell case, will you? When you first saw the man, what condition was he in, after this happened?

Doctor FITCH. The night this trouble occurred, the first I knew of it was when Mr. Corbin, the night attendant, made his first round. He told me at that time that Gartrell was very much disturbed. Just at that time I was busy with some night orders, and at 9.20 Mr. Thorne called me up and said they had just had trouble with Gartrell. I questioned him about it and found out his condition as nearly as I could over the 'phone, and told them to give him a hypodermic of morphia and hyoscine, which was done.

Previously to that they had gotten him into a camisole. I intended

to go right away, but I got another call. They said he had quieted down then. He had ceased to fight or to give them any trouble in that way, but he was crying and making quite a little noise in that way. He was considerably excited, but was not active. For that reason I ordered the hypodermic for the sedative effect. Then I instructed Mr. Corbin to look into Gartrell's condition and report to me right away, which he did. Then I called up over the phone and found that Gartrell had gone to sleep, so I did not go over immediately, but waited. I was busy from that time up until supper, and after I had supper, at 12 o'clock, that was the first ward I took in. At that time Gartrell was asleep and I did not disturb him.

However, I looked him over and saw no evidence of any injury. I questioned the attendants closely and was satisfied that no violence had been used. Those two men I would trust anywhere. Possibly they are not good witnesses, but they are both excellent attendants, and I was satisfied that Mr. Gartrell's condition was not precarious; that he had not been injured in any way. I made my other rounds and was there several times between that time and the time I went off duty. I made no further examination. I was going back to examine him, but, as I say, I was satisfied the man was not injured; and knowing that Doctor Glasscock would be on duty at 7 o'clock and would have an opportunity to examine him himself, as he always does in cases of that kind, I did not go to see him.

I saw him again Sunday, and at that time he had this bruise on the left cheek. His eyes by that time become very much bloodshot, as they frequently do in those cases where the man has been struggling violently, but there was no bruise on the eyes. In my opinion we have not a more dangerous man in the hospital than Gartrell. He is not a very large man; he is about my size, weighing about 150 pounds. He has weighed more, but he is rather thin now. He is a powerful man. I must state, to clear up that matter of the restraint being used, that I was satisfied as to Gartrell's condition—we had had trouble with him several times—and I induced Doctor Glasscock to send a camisole over there. I told him I wanted a muff, but he thought it was not necessary and that I did not need that.

So I told Thorne that any time Gartrell was in that excited condition to use that treatment if he was struggling, because several times he had assaulted patients over there, and all the patients in that building, except this man Levyson, were almost entirely helpless, and could not protect themselves in any way. Gartrell is possessed, at times, of almost fiendish cunning. For instance, early in the evening one of the men will go to supper, leaving the ward in charge of the other man. He will apparently be asleep, but when one man leaves the ward, leaving the other man alone, he several times has attacked him.

One man up until that night had been able to manage him quite easily, and when one man has gone to his supper and has returned, on several occasions he would have a little trouble with the second man while he was alone. For this reason I had told Thorne that he could use the camisole if in his judgment it was necessary, and his judgment is good. Another reason why I thought it best to have the man restrained is that at various times he tried to injure himself. At one time he tried to hang himself. He brought into play his knowl-

edge of rope making that he learned in the Navy. There is a rope that he made [producing a rope].

Mr. WALLACE. Who made that?

Doctor FITCH. Mr. Gartrell made it.

The CHAIRMAN. It is made of torn sheets?

Doctor FITCH. It is made of torn sheets. There is a lot of it. We have taken away any quantity of such stuff from him at night.

Mr. WALLACE. Doctor, I did not think you had that big a pocket.

Doctor FITCH. There is another piece [producing same]. That is Mr. Gartrell's method of doing things. If he could get the best of an attendant with these ropes he would tie him. He is a source of danger to everyone in the ward, and I rather objected to the man being put on that ward, but there are no others there that we have to watch very closely, and we put this one man in the ward and I instructed those attendants that one of them must keep the man under observation all the time. He is a man who will be perfectly friendly with an attendant one day and perhaps the next day he will form a very strong dislike. In an hour, or a day, he will change his affections.

Mr. Thorne, nearly all the time he has been there, has been able to get along very well with him, but on the night previous to that he objected to Mr. Thorne's ministration, and I told Mr. Thorne he had better attend to the ward work and let Mr. Cowhig watch him. Cowhig sat right across the hall from his door. Gartrell, on that night, seemed to be asleep. Mr. Cowhig was looking at a card, or something, and had his head down that way [indicating], and at that minute Mr. Gartrell jumped him. As a matter of course it was a severe struggle for a time. Thorne came to Cowhig's assistance, and finally the patient Levysen came to help them, to render such assistance as was necessary. They got him subdued without other trouble.

Mr. SMYSER. Knowing the disposition of the patient, you felt justified in giving the order you did with respect to the use of the camisole?

Doctor FITCH. Yes, sir; I told them when that difficulty happened they might use the camisole at any time.

Mr. SMYSER. That order first came from you?

Doctor FITCH. Yes, sir.

Mr. SMYSER. Would you now justify its use?

Doctor FITCH. Yes, sir; I think with that man in his excited condition it would be justifiable to have some sort of restraint on him every night, particularly if he is in a ward where he could not be watched closely all the time. I, myself, have never had any trouble with him.

Mr. WALLACE. What sort of restraint do you call that? [Referring to rope produced by the witness.]

Doctor FITCH. This is what Mr. Gartrell made; he tore up his sheets.

Mr. WALLACE. For what purpose; do you know?

Doctor FITCH. Suicide. He had it around his neck. As Doctor Glasscock and Mr. Martin an those people told you, he has on numerous occasions mutilated himself and attempted self-destruction in various ways, by this method, and he has tried several different kinds, particularly at night.

## TESTIMONY OF GEORGE B. GARTRELL.

GEORGE B. GARTRELL, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Are you Mr. James M. or George B?

Mr. GARTRELL. George B.

The CHAIRMAN. Mr. Gartrell, you are a brother of this Mr. Gartrell over at St. Elizabeth's, are you not?

Mr. GARTRELL. Yes, sir.

The CHAIRMAN. You are the George B. Gartrell who is mentioned in the article in yesterday morning's Post?

Mr. GARTRELL. Yes, sir.

The CHAIRMAN. How frequently have you been over to the hospital to visit your brother?

Mr. GARTRELL. I have been going over sometimes twice a week, and occasionally once a week.

The CHAIRMAN. He has been there since the 4th of April?

Mr. GARTRELL. Yes, sir.

The CHAIRMAN. What do you know about the occurrence mentioned in the Post?

Mr. GARTRELL. Sir, on Saturday afternoon I telephoned over to Doctor Glasscock to find out the condition my brother was in, so I could come over Sunday and take him out for a walk through the grounds. He told me to come in the morning; that he was getting along nicely. Sunday morning I went to see Doctor Glasscock, and they telephoned over to the building where he was located, and they said my brother had a good night's rest and they did not see why I could not be able to take him out through the grounds to give him an airing. I goes over and saw my brother. When they brought him in to me, in about ten minutes, he was beat something unmerciful. Both of his eyes was hanging the same as raw beef; the same as if they was beat up into a jelly; and underneath here [indicating] he was beat here and kicked. I turned to one of the attendants who brought him and asked him who did it, and he said two of the night men did it.

I led my poor brother out of the place and taken him over and sat him on a bench. I went over to see Doctor Glasscock again, and he was at a meeting, but Mr. Burch, the supervisor there, telephoned over and sent me over to the building where he was at. When the doctor came out he seemed to be perfectly surprised at my telling him that.

The CHAIRMAN. Who was the attendant who told you that those two night attendants did that?

Mr. GARTRELL. I think his name was Mr. Yensey.

The CHAIRMAN. What did Doctor Glasscock do? He went over with you?

Mr. GARTRELL. I demanded of Doctor Glasscock to come with me and see the condition—the way he was beat up. I went with Doctor Glasscock and helped to undress him and examine him, and from the weight of the doctor's hands on his ribs, when he was trying to find out whether any ribs were broken, he cried with pain. I said: "I think this is a shame, and I am going to ferret it out and prosecute the guilty parties." He said: "Mr. Gartrell, it is not worth while for you doing that." He says, "The men that is accused of this work

is asleep, but when they come on duty to-night I will investigate it." Yesterday I goes over again. I presented my card to have it sent to Doctor Glasscock, and the message was brought back that I couldn't see Doctor Glasscock; that I would have to see Doctor Stack.

After keeping me waiting there fifteen or twenty minutes Doctor Glasscock then came in. I spoke to him about the case of my brother, and asked him about it. He said he was resting a little easier, but they had to put him in the hospital. Then I asked the doctor to give me the names of those parties who were the night attendants. He gave me the names of George Thorne and a fellow by the name of Cowhig. Those are the two that beat him up, and the gentleman finally told me; he said they had a trusty—what they call a "trusty" there, a man that they can trust around the place—and that he even lent a hand in it, making it three men that tackled him. I told him I was going to prosecute this thing and find out the guilty parties, and he didn't give me any satisfaction at all. There is that boy, injured about 9 o'clock Saturday night, and it was reported that he was in good condition, and that I could take him out, and he didn't receive any treatment, and they never knew anything about it until after 12 o'clock on Sunday.

The CHAIRMAN. Did you take him out?

Mr. GARTRELL. I took him out, but the boy was so weak that I had to take him back. He is the most pitiful-looking sight of humanity, beat up, that I ever seen in my life. The tears actually rolled in blood from his eyes down, from where he was beat.

The CHAIRMAN. Did you ever know anything about your brother having at any time attacked people over there at the hospital?

Mr. GARTRELL. No, sir.

The CHAIRMAN. Either patients or others?

Mr. GARTRELL. No, sir; only what they have told me over there, which Dr. Glascock or some of the attendants might have told me things. Once or twice my wife and sister have been over there to see him; in fact, they go every week. About two weeks ago he was brought in after they waited there and they told me he was all bruised up in terrible condition.

The CHAIRMAN. Have you never heard the doctor say that he was in the habit of trying to injure himself?

Mr. GARTRELL. I have heard that.

The CHAIRMAN. You know about his making that rope, do you not? And being caught with the noose around his neck?

Mr. GARTRELL. I was told that.

The CHAIRMAN. You believe it, do you not?

Mr. GARTRELL. I believe it.

The CHAIRMAN. And you do not suppose that anybody else made it, and that it was brought over here as being made by him?

Mr. GARTRELL. No, sir.

The CHAIRMAN. Did you ever hear anything about your brother getting a broomstick and hitting a patient over the head?

Mr. GARTRELL. Dr. Glascock told me about it.

The CHAIRMAN. You believe that, do you not?

Mr. GARTRELL. Yes, sir.

The CHAIRMAN. Did you hear about the occasion of his taking a buckle off of his trousers, or a safety pin, and scratching himself?

Mr. GARTRELL. The doctors told me that.

The CHAIRMAN. You believe that, do you not?

Mr. GARTRELL. Well, yes, sir.

The CHAIRMAN. Has there ever been any disposition on the part of Dr. Glascock, when you have been over there, to decline to give you information about your brother, or not to treat your brother properly? I am talking about the doctor now.

Mr. GARTRELL. I have asked the doctor on two or three occasions to let me take him out and give him an airing. I asked the doctor on two or three occasions to allow me to take him out, and told him that I would be responsible for him. He told me he was perfectly harmless. He told me that on two or three different occasions—that he was good-natured and perfectly harmless.

The CHAIRMAN. And yet at the same time he told you——

Mr. GARTRELL. About these other occurrences; yes, sir.

Mr. HAY. When did he tell you about these other occurrences? At the time they happened?

Mr. GARTRELL. Maybe a day or two afterwards, when I was sitting there. Another thing that I would like to call attention to is that I was always in the habit of taking a piece of tobacco or fruit every time I visited him. On this occasion he was beat up so bad that he couldn't open his mouth to partake of the fruit that I brought him.

The CHAIRMAN. You heard the story they have told about your brother having run and jumped on one of the attendants?

Mr. GARTRELL. Yes, sir.

The CHAIRMAN. Do you believe that story?

Mr. GARTRELL. Yes, sir; but I don't think three big able-bodied men should take one man because the man is a little off and beat him up into a jelly. He has not been adjudged by a jury or anything like that as insane. He was taken from the Fern and sent to the Naval Hospital, and the next day he was sent to St. Elizabeth's for treatment.

The CHAIRMAN. Do you think he is sane?

Mr. GARTRELL. They beat that boy back to his senses again, the way he cried Sunday, "for God's sake, to take him out or they would kill him."

The CHAIRMAN. Do you put dependence in all these stories your brother tells? Do you think he tells the truth? I am not accusing your brother of telling an untruth intentionally, but do you think you could put dependence in the statements your brother makes?

Mr. GARTRELL. Not in all of them; no, sir.

The CHAIRMAN. Do you think you can put dependence in what he says of his own condition of mind?

Mr. GARTRELL. Myself, sir, I can.

The CHAIRMAN. Has he ever talked to you in regard to thinking that he was directed by the Lord to kill children?

Mr. GARTRELL. He has.

The CHAIRMAN. Has he ever told you about having eyes composed of jewels, and that he was going to take them out?

Mr. GARTRELL. Of glass eyes; he has, sir.

The CHAIRMAN. Yet you think he is not entirely insane?

Mr. GARTRELL. Well, sir, I wouldn't want to say that positively.

The CHAIRMAN. Do you not think that the only reason Doctor Glascock hesitated about allowing you to take him out was because

he was fearful that your brother might do some injury to you or hurt some patient, or hurt himself?

Mr. GARTRELL. Well, sir, he might have looked at it in that way.

The CHAIRMAN. Can you imagine any possible reason why Doctor Glasscock, if he thought it was safe, would not have been glad to have had your brother taken out in the air, so as to be temporarily relieved of the care of him by the attendants?

Mr. GARTRELL. I think the Doctor would, sir.

The CHAIRMAN. And would you not trust Doctor Glasscock's opinion as to whether it was right for your brother to go out, rather than your own?

Mr. GARTRELL. Yes, sir; I believe I would.

Mr. HAY. What you complain of is the way in which your brother was treated when he was insane?

Mr. GARTRELL. What I complain of is the brutal treatment he received Saturday night, and leaving him from Saturday night—I have investigated it—

Mr. HAY. You have no complaint to make generally of the treatment he received there?

Mr. GARTRELL. I have from Saturday night up to Sunday.

Mr. HAY. But I mean before that.

Mr. GARTRELL. No, sir.

Mr. HAY. But you complain of the treatment he received then, and you are satisfied from your examination of your brother immediately after that he had been beaten?

Mr. GARTRELL. He had been beaten, sir. This man Yensey admits that the attendants jumped him and beat him. Doctor Glasscock admitted that there was one over there, what they call a trusty, and that made three instead of two that had a hand into it.

Mr. HAY. And while you believe that your brother did make the assault on the attendant, yet you think the attendants ought not to have treated him in the way he was treated?

Mr. GARTRELL. No, sir; I do not. I do not think it requires three big, able-bodied men to manage one man, whether he is insane or not, and kick the life out of him and beat him up like that.

Mr. HAY. Did you see any other bruises on him except the place upon his face, and his ribs?

Mr. GARTRELL. Yes, sir; down on his leg, where he was kicked. He admitted to me that when he was getting up off of his knees he was kicked again, and I went to the attendant—that is, Mr. Yensey—about the treatment and the way he was beat up, and he kind of got scared and said nothing more; and when I told Mr. Burch, the supervisor, about it, Mr. Burch made the remark that Mr. Yensey ought to be very particular what he says.

Mr. SMYSER. Yesterday, in the paper, you were quoted as saying, "Up to three months ago my brother lived with me"—

Mr. GARTRELL. That is my other brother, John. I beg your pardon.

Mr. SMYSER. This article did not come from you, then?

Mr. GARTRELL. Yes, sir. My brother is John M., and I am George B.

Mr. SMYSER. Were you present when this was given?

Mr. GARTRELL. Yes, sir.

Mr. SMYSER. Then I want to read a little further, and I will ask you if you heard your brother make this statement to a reporter: "Up to three months ago my brother lived with me. He was as harmless

as a child, and to-day I would have no fear of leaving him alone with my wife and children."

Mr. GARTRELL. I heard that; yes, sir.

Mr. SMYSER. From your knowledge of him, and from what has been detailed here as to his condition, do you subscribe to that?

Mr. GARTRELL. Sir, I would not be afraid to-day to stay with him, and take him home with me.

Mr. HAY. What is your business?

Mr. GARTRELL. I am a clerk, sir.

Mr. HAY. In whose employ?

Mr. GARTRELL. Sir, I am employed at the furniture store up at Massachusetts avenue—Stumph & Lyford.

The CHAIRMAN. I think that is all.

Mr. GARTRELL. I would like to make a statement. There is a piece in this morning's Post intimating that I had an interview with Doctor White. I do not know the gentleman. I have not seen him, and I wouldn't know him if I ran right into him.

The CHAIRMAN. You will have to talk to the newspaper reporters about that.

Mr. GARTRELL. The only two gentlemen I have had interviews with are Doctor White and Doctor Glasscock.

The CHAIRMAN. Have you talked with any members of the committee about this matter?

Mr. GARTRELL. No, sir.

Mr. HAY. You say that you had interviews with Doctor White and Doctor Glasscock?

Mr. GARTRELL. Not Doctor White—Doctor Glasscock and Doctor Stack; but Doctor White, sir, I do not know the gentleman and would not know him if I ran right into him.

#### TESTIMONY OF JOHN M. GARTRELL.

John M. GARTRELL, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Do you live in Washington?

Mr. GARTRELL. Yes, sir.

The CHAIRMAN. Whereabouts?

Mr. GARTRELL. I live now at 505 E street NW.

The CHAIRMAN. What is your business?

Mr. GARTRELL. Salesman.

The CHAIRMAN. Employed here in the city?

Mr. GARTRELL. Yes, sir.

The CHAIRMAN. You are a brother of this Mr. Gartrell that is over in St. Elizabeth's?

Mr. GARTRELL. Yes, sir.

The CHAIRMAN. Have you visited him frequently while he has been there?

Mr. GARTRELL. I used to go every day for the first month, or pretty near every day.

The CHAIRMAN. Were you over there on Sunday last?

Mr. GARTRELL. No, sir.

The CHAIRMAN. Have you seen your brother since this affair took place on Saturday night?

Mr. GARTRELL. No, sir.



The CHAIRMAN. You do not know anything about the matter, do you?

Mr. GARTRELL. Only the statement I put in in regard to him living at my house.

The CHAIRMAN. Have you still the same opinion that you would be willing to have him at your house to be with your wife and children?

Mr. GARTRELL. I will tell you the way I feel about that. My brother has been in fear ever since he has been there. When my brother first went there he did not seem to be insane, as a great many thought, and as far as him being dangerous, they give him plenty of liberty there. I have had him out walking around the yard, and I don't consider that where they consider a man so dangerous they would allow him to go out and walk around the yard.

The CHAIRMAN. How recently have they done that?

Mr. GARTRELL. About a month ago, and since I have had him out my brother has had him out since then.

The CHAIRMAN. When was the last time you saw your brother?

Mr. GARTRELL. About three weeks ago. I have been away for a while.

#### TESTIMONY OF DR. HENRY A. HUTCHINSON.

Dr. HENRY A. HUTCHINSON, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor, where do you live?

Doctor HUTCHINSON. At Dixmont, Pa. I am physician and superintendent of the Western Pennsylvania Hospital for the Insane, at Dixmont, Pa.

The CHAIRMAN. How long have you been such?

Doctor HUTCHINSON. I have been at that hospital for 27 years.

The CHAIRMAN. How long have you been superintendent of it?

Doctor HUTCHINSON. Twenty-one years.

The CHAIRMAN. Were you previous to that connected with other institutions also.

Doctor HUTCHINSON. No, sir.

The CHAIRMAN. How large an institution is this?

Doctor HUTCHINSON. I have 900 patients.

The CHAIRMAN. Is it one of the State institutions?

Doctor HUTCHINSON. No, sir; mine is a corporation, although we have several hundred State patients there. The State sends them there under special acts.

The CHAIRMAN. And pays you per capita?

Doctor HUTCHINSON. Yes, sir.

The CHAIRMAN. How much do they pay you?

Doctor HUTCHINSON. Three dollars and seventy-five cents a week.

The CHAIRMAN. You have visited St. Elizabeth's, have you not?

Doctor HUTCHINSON. I have been to St. Elizabeth's on three different occasions; twice several years ago, and yesterday afternoon from about 12 o'clock until after 5 o'clock.

The CHAIRMAN. Did you make a thorough investigation of this hospital?

Doctor HUTCHINSON. I employed every moment of my time yesterday afternoon.

The CHAIRMAN. What is your general idea of that institution, from what you saw yesterday?

Doctor HUTCHINSON. I was very much gratified with the conditions I found at St. Elizabeth's. I was very much pleased with it. I was more pleased than I had really expected to be. I find it a very nice institution, a fine institution, and a good institution, and in my judgment it is doing a great deal of good for humanity over there.

The CHAIRMAN. What do you think in regard to the separation of patients there? Do you approve of the method they have?

Doctor HUTCHINSON. I went over that as thoroughly as I could, and I believe they are classified scientifically. In my conversation with Doctor White I was led to believe they were classified in a scientific manner, the same as we classify them at home.

The CHAIRMAN. You think that is the most approved way, to separate the patients in the manner in which it is done in your institution and in this one?

Doctor HUTCHINSON. Yes, sir.

The CHAIRMAN. Did you go into the kitchen departments at all?

Doctor HUTCHINSON. Yes, sir; I went into the kitchen. The kitchen is a much better kitchen than we have at home.

I found the kitchen an excellent kitchen. It is nice and clean and well kept. Everybody seemed to be attending to their business. Everybody seemed to be looking nice and competent, and I also examined the appliances. They are modern appliances. I also examined the milk supply, and tasted the milk and examined the bread. I tasted it and the butter. I also examined the meat; in fact, all the supplies, and they are as good as we have at home, and I know ours are good at home. They are of excellent quality—as good as you can get anywhere. The bread was fine, and the cakes were nice.

The CHAIRMAN. From your knowledge of the advance of the science of the treatment of the insane, would you say that St. Elizabeth's was abreast of the times?

Doctor HUTCHINSON. From my opinion that I formed yesterday, I think it is abreast of the times. I think it is a modern institution. I think the treatment of the patients there is modern. I think it is up to date. We went, or I went into the classification of their forms of insanity, of their treatment, of their medical supervision, of their employment, occupation, and amusements. I have not tried to gather every detail in, but I think it is fully up to the times.

The CHAIRMAN. Did you examine also the system of keeping the records in the office?

Doctor HUTCHINSON. I listened to it and they seemed to be all right. They reported to me that the different physicians reported verbally to the doctor and also presented him with written reports every morning, and that they had a staff session once a week, in which all cases and matters of importance were discussed pertaining to the patients and to the general usefulness of the institution, and it seemed to me to be correct.

The CHAIRMAN. Had you ever met Doctor White before this visit?

Doctor HUTCHINSON. I met him once. I was merely introduced to him at Boston at the meeting of The American Medico-Psychological Association, of which we are both members.

The CHAIRMAN. Do you know of him? Do you know his reputation generally?

Doctor HUTCHINSON. I have heard of Doctor White frequently through his writings and contributions to the American Journal of Psychiatry, and he is considered a strong man in psychology. He is considered a good man, a modern man, and a man who knows his business. I also formed my opinion of Doctor White yesterday as a man and as a superintendent, in my association with him, and I did not see anything to criticise.

The CHAIRMAN. Doctor, do you, in the general management of an insane hospital, think it would be advantageous to separate the positions of superintendent and physician? To have, for instance, one man entirely in charge of the condition of the patients and the other man take care of the details of the superintending of a tremendous establishment such as that at St. Elizabeth's?

Doctor HUTCHINSON. It is my opinion that if you have an institution you must have one head for it, and that head should be the superintendent and the physician; and that no orders for the purchase of supplies should emanate from anyone but himself. He should sign all those orders. In Doctor White's case I am sorry that his institution is so large. That is a heritage that has descended to him. It is not his fault. I think his institution is larger than it ought to be. I am in favor of smaller institutions. I think mine is too large; but in such a case as that institution, he is a young man, he is an active man, he is in good health, and I think if he is up and alert that he is able to take care of it.

The CHAIRMAN. Do you know any of the other very large institutions, for instance, the Ward's Island Institution, the Manhattan State, the Islip Institution, and others?

Doctor HUTCHINSON. I have been there, but it was several years ago. I would hardly like to say much about it, however.

The CHAIRMAN. What other institutions are you familiar with?

Doctor HUTCHINSON. I am familiar with the Norristown Pennsylvania Hospital.

The CHAIRMAN. How many patients have they?

Doctor HUTCHINSON. Over 2,300, I think; nearly 2,500. I do not like their system there. They have practically three heads, a resident physician female, a resident physician male, and they have a steward or purchasing agent, whatever they may choose to call him. He seems to be the head man over the medical department. I would not like that. I am in favor, very emphatically, of one man supervision, one man authority. That is the way it is at my place. If you have a superintendent who is conscientious and careful he ought to get along.

The CHAIRMAN. In other words, you think that by having one man it avoids any possible clash of authority?

Doctor HUTCHINSON. Yes, sir. My word is law at home, and I say it ought to be, in my opinion.

The CHAIRMAN. In other words, there must be one responsible head, and he be responsible for the conduct of the building.

Doctor HUTCHINSON. The board look to me. They do not go to the assistants. They come to me.

The CHAIRMAN. Did you meet the members of the medical staff there?

Doctor HUTCHINSON. I met, I think, two or three of the gentlemen. I met Doctor Clark—

The CHAIRMAN. How did they impress you?

Doctor HUTCHINSON. I was favorably impressed, and I was favorably impressed with Doctor O'Malley. I was very favorably impressed. I think she is a very competent woman. She thoroughly understands the management of her cases.

The CHAIRMAN. What do you think about the number of attendants over there? Would you say the number there is sufficient?

Doctor HUTCHINSON. They have a sufficient number of attendants, in my judgment. I think where you are going to get the modern treatment of patients, where you are going to give them modern treatment, you must have plenty of attendants, which they seem to have. I thought they had plenty. I do not think they have too many, you understand, but I think they have sufficient.

The CHAIRMAN. Did the attendants and nurses favorably impress you, generally speaking?

Doctor HUTCHINSON. Yes, sir.

Mr. HAY. Doctor, do you think it wise to treat epileptics in the same institution where you treat the other forms of insanity?

Doctor HUTCHINSON. I do not think it is wise, but you can not help it in these large institutions. We have them at home, and we try to separate them.

Mr. HAY. Do you think it wise for the Government of the United States, which is able to do it, to have a separate institution for epileptics?

Doctor HUTCHINSON. I think so.

Mr. HAY. What character of inspection do you have over the institution you are in charge of?

Doctor HUTCHINSON. I am in my wards with my assistants every day.

Mr. HAY. I mean outside inspection, Doctor?

Doctor HUTCHINSON. How is that?

Mr. HAY. I mean outside inspection. Does anybody else come to inspect it?

Doctor HUTCHINSON. I have an excellent board of managers who come to the institution once every month, and sometimes oftener; and they hold two and three meetings sometimes in between, in the city of Pittsburg. They have already held two meetings during my absence. I have been away from home three weeks.

Mr. HAY. They have access to your hospital at all times without informing you of their coming?

Doctor HUTCHINSON. They never inform me. The clerk sends a regular monthly notice, you know, to come to the regular stated meeting; but at other times they come as they please.

Mr. HAY. Do you not think that every institution of this character ought to have an inspection of that sort?

Doctor HUTCHINSON. Yes, sir; but it belittles an institution and its officers, and it is not dignified for the managers to come unless they give the officers notice—not that they will find anything wrong, but I think that is the dignified method. But they do not always do it, and are not expected to.

Mr. HAY. What is the purpose of an inspection, Doctor?

Doctor HUTCHINSON. My managers come to Dixmont. I meet them and they go around the institution. I take them around the institution to see the wards, and they talk with the patients. They converse with them, and they talk to me about——

Mr. HAY. I understand that——

Doctor HUTCHINSON. About their care, about their comfort and happiness and well-being.

Mr. HAY. Has the State of Pennsylvania what is known as a lunacy commission?

Doctor HUTCHINSON. Yes, sir.

Mr. HAY. Do they visit your institution?

Doctor HUTCHINSON. They come there frequently. They come there without any notice to me whatever.

Mr. HAY. What do you think of that? Do you think that is a good thing?

Doctor HUTCHINSON. I am very much in favor of a good board of lunacy. We have a good board of lunacy in Pennsylvania.

Mr. HAY. Do you not think it would be a good thing to have a lunacy commission for the District of Columbia?

Doctor HUTCHINSON. I can hardly answer that question intelligently. I do not know just what outside supervision there is at St. Elizabeth's, outside of——

Mr. HAY. They have a board like you have. They have a board of visitors.

Doctor HUTCHINSON. I do not know. There is only one institution here. I believe, one charitable institution of this kind, and whether it would be necessary to have a board to look after them in addition to the board of visitors I am hardly prepared to say. I do not know enough about the conditions here in Washington to know that.

Mr. HAY. You say they have sufficient attendants there?

Doctor HUTCHINSON. Yes, sir.

Mr. HAY. You were only there about five hours?

Doctor HUTCHINSON. Yes, sir.

Mr. HAY. You were not able to go through all of the wards, I presume?

Doctor HUTCHINSON. No, sir; not all of them.

Mr. HAY. Do you know how many attendants are on each ward?

Doctor HUTCHINSON. They did not tell me how many there were, specifically, on each ward, but they told me the troublesome wards were well officered, and they gave me the total number of attendants and also the number of patients.

Mr. HAY. You got your information from the superintendent, necessarily, did you not?

Doctor HUTCHINSON. I got my information from the superintendent and from the other officers whom I met, and from my own observation.

Mr. HAY. You heard this Gartrell case gone over here this morning, did you not?

Doctor HUTCHINSON. Yes, sir.

Mr. HAY. What do you think about that?

Doctor HUTCHINSON. That is a simple case. There is nothing in it at all, in my judgment, from listening to the testimony here. He

is nothing but a paretic, and he has outbreaks of violence, which they all do. I could not for the life of me see that the man had been ill-treated in any sense of the word. The young doctor gave a very intelligent account of that paretic and the occurrence.

Mr. HAY. You mean Doctor Glasscock?

Doctor HUTCHINSON. Yes, sir. I see those same things at home. Why, those things will happen in any institution. Any paretic will have an outbreak of violence from time to time.

Mr. HAY. How many attendants, Doctor, do you think a hospital ought to have to treat the insane in the most approved style?

Doctor HUTCHINSON. We have at home about one to ten. Over here I think they have one to five or six. Is that not right, Doctor White?

Mr. HAY. They have one to eight.

Doctor HUTCHINSON. I was very glad yesterday—I think it most commendable—when I heard that he had a larger proportion of attendants than I had. I thought it was most commendable.

Mr. HAY. Yours is not a State institution, I understand?

Doctor HUTCHINSON. No, sir.

Mr. HAY. It is impossible for you to say, I presume, how many attendants ought to be on each ward of the hospital unless you could go through it and examine the character of the patients, and so on?

Doctor HUTCHINSON. If I lived there a while I could tell you that.

Mr. HAY. But you could not state without personal observation?

Doctor HUTCHINSON. No, sir; that must remain with the physicians.

Mr. WALLACE. Doctor, how many patients have you in the institution that you manage, or of which you have charge?

Doctor HUTCHINSON. How is that, sir?

Mr. WALLACE. How many patients are there in the institution of which you have charge?

Doctor HUTCHINSON. Nine hundred.

Mr. WALLACE. What is the per capita cost, Doctor?

Doctor HUTCHINSON. At my place?

Mr. WALLACE. Yes, sir.

Doctor HUTCHINSON. Four dollars and thirty-six cents.

Mr. WALLACE. For what length of time?

Doctor HUTCHINSON. A year.

The CHAIRMAN. A week you mean?

Doctor HUTCHINSON. A week; excuse me. I meant that was for the last year.

Mr. WALLACE. I thought you were mistaken. I was going to call your attention to it in a moment. Do you use butter or oleo for the staff?

Doctor HUTCHINSON. We use butter, for which I pay in the winter 29, 30, and 31 cents, bought by competition; bought by bids, you understand.

Mr. WALLACE. Why do you not use oleomargarine?

Doctor HUTCHINSON. It is against the law of Pennsylvania.

Mr. WALLACE. Can you give the reason for that?

Doctor HUTCHINSON. That you will have to ask the lawmakers. I could not answer that.

Mr. WALLACE. I thought probably you understood the reason?

Doctor HUTCHINSON. The patients at my house use the same butter identically that I use on my table.

Mr. WALLACE. They do not use oleomargarine then at all?

Doctor HUTCHINSON. No, sir.

Mr. WALLACE. Doctor, you know what oleomargarine is composed of?

Doctor HUTCHINSON. I have heard what it is composed of; that it is a fat, nice clean fat. I never heard anything else. I never heard anything unkindly of it.

Mr. WALLACE. I am not trying to degrade it in any respect, but I just wanted to know what it was.

Doctor HUTCHINSON. I myself would prefer butter, but oleomargarine may be all right, so far as I know.

Mr. HAY. What kind of restraint, if any, do you use in your institution?

Doctor HUTCHINSON. We use some restraint. We use the camisole; We also use what we call out there a strait-jacket. We also tie the patients that are violent from time to time, like acute cases and hyperacute cases—such cases as those—with sheets. The camisole is made of duck, with endless sleeves, a sleeve about that long [indicating]. We just put the patient's arms in it and lace it down the back.

A strait-jacket is made of canvas, and the sleeves taper that way [indicating]. They are 8 feet long. They are made long so that you can fold them around the patient and tie them to the side of the bed, in case the patient is a hyperacute case, to keep him in bed safely and comfortably.

Mr. WALLACE. Do you use restraint; if so, to what extent; also give the character of same.

Doctor HUTCHINSON. The restraint at our house is never ordered unless by the order of a physician.

Mr. WALLACE. The physician in charge of that particular ward?

Doctor HUTCHINSON. Yes, sir.

Mr. WALLACE. How many camisoles were made or purchased by your institution in the last year?

Doctor HUTCHINSON. We make them there. We make them in the sewing room; the sewing girls make them for us. We may, perhaps, make a couple of dozen a year, and when they wear out we make some new ones, as the case may require. We have not in our institution more than 5 or 6 patients who are restrained at one time.

Mr. WALLACE. About what per cent of your inmates are daily restrained?

Doctor HUTCHINSON. I could hardly answer that, except in this way: That out of 900 patients you will not find 6 patients under this restraint.

Mr. WALLACE. Restrained daily?

Doctor HUTCHINSON. Yes, sir.

Mr. WALLACE. Are there types of insanity represented in your institution to the same degree that is found at the Government Hospital for the Insane?

Doctor HUTCHINSON. I think they are, except that I will qualify that statement in this way, that I rather think Doctor White gets a poorer class of patients, from a poorer class of people, a more degenerate class of people than we do.

Mr. WALLACE. He gets them from different institutions and places?

Doctor HUTCHINSON. Yes, sir.

Mr. WALLACE. How often do you visit each ward of your hospital?

Doctor HUTCHINSON. I am in the wards every day with one or two or three of my assistants—some wards every day.

Mr. WALLACE. You mean the assistant physicians?

Doctor HUTCHINSON. I mean the assistant physician. I am all over the wards as far as I can get over them alone. I am in my wards, some of the wards, three or four times a day. I am all over the house four and five times a week at any and all hours.

Mr. WALLACE. In your opinion do you not think that the criminal insane should be confined in a separate institution designed especially for such cases?

Doctor HUTCHINSON. You mean those that have served sentence and are convicted? They ought to be.

Mr. WALLACE. Are they criminal insane?

Doctor HUTCHINSON. Yes, sir.

Mr. WALLACE. That is what I mean then.

Doctor HUTCHINSON. No; they are the insane criminals. There is a distinction between criminal insane and insane criminals. The insane criminals should be separate.

Mr. WALLACE. Just give us the definition of the distinction between an insane criminal and a criminal insane.

Doctor HUTCHINSON. An insane criminal is a man who has been convicted of crime and who has become insane and has been sent to the institution. The criminal insane are the insane with criminal instincts—homicidal.

Mr. WALLACE. And he is put there because he has criminal instincts?

Doctor HUTCHINSON. Yes, sir; for doing harm or doing violence.

Mr. WALLACE. Epileptic insanity is best cured in a special and separate asylum for such cases, is it not?

Doctor HUTCHINSON. How is that?

Mr. WALLACE. For instance, you take the epileptic class of insane. Is it not the best treatment for them to be in a separate ward or a separate institution, separated from other patients?

Doctor HUTCHINSON. I do not know that it is the best treatment for the epileptic, but it is the best treatment for the other patients who have to witness the epileptic.

Mr. WALLACE. It is better for the other patients?

Doctor HUTCHINSON. Yes, sir.

Mr. WALLACE. Then your idea is that epileptic insane people ought not to be inclosed or put with other insane people?

Doctor HUTCHINSON. No, sir; they ought to be separated.

Mr. WALLACE. How many physicians have you on your regular staff, Doctor?

Doctor HUTCHINSON. Three assistants beside myself. There are four of us.

Mr. WALLACE. How many patients have you under your control?

Doctor HUTCHINSON. Nine hundred.

Mr. WALLACE. And you have three physicians besides yourself?

Doctor HUTCHINSON. Yes, sir.

Mr. WALLACE. Have you any assistant physicians?

Doctor HUTCHINSON. I have three assistant physicians.



Mr. WALLACE. In addition to what you have stated?

Doctor HUTCHINSON. No, sir. I have myself and three assistant physicians. There are four medical officers in my hospital.

Mr. WALLACE. How many of your physicians are married?

Doctor HUTCHINSON. Only myself.

Mr. WALLACE. What pay do your assistants get?

Doctor HUTCHINSON. My first assistant gets \$2,000; my second assistant gets \$1,500, and my third assistant gets \$1,100.

Mr. WALLACE. How many of them receive maintenance at your asylum?

Doctor HUTCHINSON. All of them?

Mr. WALLACE. They do not have to buy their necessaries of life?

Doctor HUTCHINSON. No, sir.

Mr. WALLACE. That includes their families, I suppose?

Doctor HUTCHINSON. My family is very small—just my wife.

Mr. WALLACE. I say, where they have families it includes the families?

Doctor HUTCHINSON. They have no families. They are single.

Mr. WALLACE. But I understand you to say—

Doctor HUTCHINSON. I just have my wife and myself. We have no children, sir.

Mr. WALLACE. But you have maintenance for yourself and wife?

Doctor HUTCHINSON. Yes, sir.

Mr. WALLACE. And if those physicians had families they would have maintenance?

Doctor HUTCHINSON. No, sir; they would not be there. I would not have a married man in my place.

Mr. WALLACE. Is that so?

Doctor HUTCHINSON. No, sir.

Mr. WALLACE. What is your reason for that?

Doctor HUTCHINSON. I would rather have a single man.

Mr. WALLACE. You would rather have single men?

Doctor HUTCHINSON. Yes, sir. I do not want to be bothered with a man and his family there besides my own.

Mr. WALLACE. Out in our asylum at St. Elizabeth's we have quite a number of married men.

Doctor HUTCHINSON. They may have a different residence there—quarters and all that—but at our house the building is so arranged that I do not think it would be very agreeable and pleasant, and therefore I much prefer that my assistants remain single.

Mr. WALLACE. Would not that be a preference under any circumstances?

Doctor HUTCHINSON. If they have ample quarters in which to have their families, I think it is all right and proper, and I would have no objection to it whatever.

Mr. WALLACE. Or where they could live outside of the grounds?

Doctor HUTCHINSON. No, sir; where they have their own houses or quarters inside of the institution; but in institutions like my house, which is a building all under one roof, it is not pleasant to have two families, and therefore I prefer one family—my own.

Mr. WALLACE. If you had plenty of room, there would be no objection to each one of your unmarried physicians having families?

Doctor HUTCHINSON. No, sir; I would not care then.

MR. WALLACE. How many automobiles and horses and carriages have you for your personal use furnished by the State?

DOCTOR HUTCHINSON. I haven't any automobile. There is not one on the place. There are signs over the institution that no automobile is allowed, by order of the board of managers, in the property. [Laughter.]

MR. WALLACE. They will not let you have them, then, Doctor, at all?

DOCTOR HUTCHINSON. No, sir.

MR. WALLACE. Give us some idea of the diet for the different kinds of patients, and what they ought to have.

DOCTOR HUTCHINSON. I can only do that by way of comparison with Doctor White's dietary, which I examined yesterday. His dietary is very liberal. He has a liberal diet for the sick and for the infirm and feeble patients, which I thought was very excellent and very liberal. He has an abundant supply of milk; and there seems to be everything on it that could be wished for.

MR. WALLACE. Doctor, that is what you saw yesterday. Have you been to that institution for the last three or four months back?

DOCTOR HUTCHINSON. No, sir.

MR. WALLACE. You have not examined the food, then, and you know nothing about it that far back?

DOCTOR HUTCHINSON. No, sir.

MR. WALLACE. You only speak of what you saw on yesterday?

DOCTOR HUTCHINSON. Yes, sir.

MR. WALLACE. Now, Doctor, in your own institution, I would like to have your opinion as to the diet.

DOCTOR HUTCHINSON. In our own institution the dietary is much the same. We have fresh meat twice a day for everyone in the house. We have good coffee, bread and butter. We have plenty of milk, and our dietary is about the same as the one I was shown yesterday. There are a great many things in the dietary that you can not enumerate, which come along in their season—berries and little odd things, vegetables, etc.

MR. WALLACE. Do you have fruits in your institution?

DOCTOR HUTCHINSON. Yes, sir; an abundance of it.

MR. WALLACE. Of what kind?

DOCTOR HUTCHINSON. Oh, different fruits. We have apples, berries, plums; we have peaches—

MR. WALLACE. Oranges and lemons?

DOCTOR HUTCHINSON. We only buy those for certain cases, when we think they want them or would enjoy them.

MR. WALLACE. And in the season of the year?

DOCTOR HUTCHINSON. Yes, sir.

MR. WALLACE. Do all your patients have these dietary articles, like milk and fruit and butter?

DOCTOR HUTCHINSON. They all get the regular dietary, and the patients that get milk are the feeble patients and the infirm patients that need milk and where it is prescribed by the physicians. We use 100 gallons of milk at our house a day, which is all consumed by the patients who need milk.

MR. BARCHFELD. Doctor, what is the size of your institution—that is, grounds, etc.?

Doctor HUTCHINSON. We have 373½ acres of land. Our institution accommodates 600, and there are 900 patients in it.

Mr. BARCHFELD. How can you take care of the additional 300 patients?

Doctor HUTCHINSON. We have to sleep them on the floor, I am sorry to say; we are so crowded. Our wards are so crowded that there is nothing else to do.

Mr. BARCHFELD. Your institution is a private institution?

Doctor HUTCHINSON. You might call it so; yes, sir. It is a corporation, as you know, and it is controlled by a board of managers appointed by the president of the board. There are three State managers, who were appointed some years ago when they made a little appropriation from the State. The State said, "If you expect this appropriation we would like to give you three State managers," which they did, showing at once by that statement that they had had no control of the institution.

Mr. BARCHFELD. What is the State appropriation?

Doctor HUTCHINSON. I went along for sixteen years without getting a cent from the State. This last year I asked them for \$36,000 to put in some little improvements, which they gave me without any question.

Mr. WALLACE. In Pennsylvania?

Doctor HUTCHINSON. Yes, sir; I did not pay any attention to it. They gave it to me without any trouble whatever.

Mr. BARCHFELD. What do you charge the State for the care of its patients?

Doctor HUTCHINSON. \$2, and the \$1.75, which makes up the \$3.75, we receive from the counties and townships from which the patients are sent.

Mr. BARCHFELD. What is your salary, Doctor Hutchinson?

Doctor HUTCHINSON. My salary is \$3,500.

Mr. BARCHFELD. You have carriages and horses?

Doctor HUTCHINSON. I have my own.

Mr. BARCHFELD. Your own?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. Purchased by you?

Doctor HUTCHINSON. They belong to me; yes, sir, the whole outfit—everything belongs to me.

Mr. WALLACE. You mean that you purchased them with your own money?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. Do you operate a farm?

Doctor HUTCHINSON. We have an excellent farmer, who reports to me every morning at 9 o'clock the proceedings of the day before and whatever business he may want to consult me about for the day.

Mr. BARCHFELD. Do you work any of your patients?

Doctor HUTCHINSON. Yes, sir; everyone we possibly can. They are all worked under the direction and by the order of a physician.

Mr. BARCHFELD. You think that is conducive to their health?

Doctor HUTCHINSON. Yes, sir; to their health and happiness and comfort of mind, and it also is a great saving to the institution.

Mr. BARCHFELD. How many of your patients do work out of your aggregate of 900?

Doctor HUTCHINSON. You can hardly work more than 50 per cent in an institution.

Mr. BARCHFELD. I think that is a very good percentage.

Doctor HUTCHINSON. It is a large percentage.

Mr. BARCHFELD. You would like to operate more if you could?

Doctor HUTCHINSON. Yes, sir; but ours is an old institution, and there are a great many demented in it who are unable to do anything.

Mr. BARCHFELD. How many attendants have you in that hospital?

Doctor HUTCHINSON. I think we have about 40 girls and 70 men.

Mr. BARCHFELD. Do you have any trained nurses?

Doctor HUTCHINSON. Yes, sir; we have one of the best training schools, I think, in the country. We have graduates of our school there at home.

Mr. BARCHFELD. Have you an amphitheatre for an operating room?

Doctor HUTCHINSON. We have a general drug store, where we keep our drugs; and then we have two small, what we call, operating rooms, where we have operating tables and surgical appliances; everything of that kind.

Mr. BARCHFELD. You saw the operating room at St. Elizabeth's?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. How does that compare with your operating room?

Doctor HUTCHINSON. It is very much nicer than mine; very much nicer.

Mr. BARCHFELD. Any more modern?

Doctor HUTCHINSON. Oh, yes, sir.

Mr. BARCHFELD. You have epileptics in your institution?

Doctor HUTCHINSON. Yes, sir; we have about 38 to 40.

Mr. BARCHFELD. They are separated?

Doctor HUTCHINSON. We try to separate them as far as possible; yes, sir.

Mr. BARCHFELD. You know they are separated over in St. Elizabeth's?

Doctor HUTCHINSON. I was told they were; yes, sir.

Mr. WALLACE. Separate diet, too, doctor?

Mr. BARCHFELD. How do you amuse your patients?

Doctor HUTCHINSON. The epileptics, we try, for instance, not to give them meats. We try to give them light diet, because it is my idea if you give epileptics heavy diet they will have more epilepsy. How is that, Doctor?

Mr. BARCHFELD. How do you amuse your patients?

Doctor HUTCHINSON. During the cold months we have a party, or what we call a party, once every week, for which we get the best music possible. They have Mr. Terry, as you know. We also have a dancing class, where all the female nurses and the more intelligent female patients are instructed to dance. We believe that is conducive to good deportment and discipline. Then, we are blessed with a great many good men there in Pittsburg, and we get a large number of entertainments and concerts. There is no difficulty whatever about getting the best talent in the city of Pittsburg to entertain us.

Mr. BARCHFELD. You have a concert hall, I believe, and a dance hall also?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. What is the size of your dance hall?

Doctor HUTCHINSON. I can hardly tell you. It is a very large room.

Mr. SMYSER. Do you mean to say that the people of Pittsburg contribute to your concerts and amusements?

Doctor HUTCHINSON. What I mean to say is all I have to do is to inform the people that I should like to have an entertainment and they are very glad to come.

Mr. SMYSER. Could you not send a few of your public-spirited people down here?

Doctor HUTCHINSON. They are only too glad to come and entertain us.

Mr. SMYSER. I mean could you not induce some of your public-spirited people to come down here?

Doctor HUTCHINSON. They are very good to us, Judge.

Mr. BARCHFELD. You have a ball once a year—a Christmas function—I believe?

Doctor HUTCHINSON. That, Doctor Barchfeld, is just the same as any other weekly party. It is written up sometimes by some ambitious reporter.

Mr. BARCHFELD. You adopt that form of amusement in order to amuse the patients and to bring them in contact with the public and allow the public to see your institution?

Doctor HUTCHINSON. We have a great many entertainments.

Mr. BARCHFELD. So that they can see you are operating a progressive institution?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. Your female nurses have a separate dormitory?

Doctor HUTCHINSON. I am sorry to say they have not, although I hope to give them one within a reasonable time.

Mr. BARCHFELD. That is modern, is it not?

Doctor HUTCHINSON. Yes, sir; they have their rooms in their wards.

Mr. BARCHFELD. You saw the dormitory at St. Elizabeth's for the nurses?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. The home for nurses?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. Have you ever seen a better one?

Doctor HUTCHINSON. I do not know that I have seen better ones. I have seen several connected with hospitals all over the country—at Warren and Danville and at Bloomingdale, and at the other institution there out of Boston—Waverly.

Mr. BARCHFELD. You saw the hydrotherapeutic treatment applied there, did you not?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. Have you that system in your institution?

Doctor HUTCHINSON. No, sir; that is in advance of my hospital.

Mr. BARCHFELD. There is not any question about your getting that in the institution as soon as you can?

Doctor HUTCHINSON. The managers are in favor of it, and will do all they can to put it in as soon as they have enough funds to do so. They are in favor of it.

Mr. BARCHFELD. Do you have the electric treatment at your institution?

Doctor HUTCHINSON. No, sir.

Mr. WALLACE. What about that swinging proposition there in front of you, Doctor [referring to the rope produced by Doctor Fitch]?

Doctor HUTCHINSON. I am sorry to see that. That might be the means of causing the death of some attendant, if that man is not very carefully watched. He might choke an attendant with that.

Mr. WALLACE. Do you see that often in your institution?

Doctor HUTCHINSON. Yes, sir.

Mr. WALLACE. You see it often?

Doctor HUTCHINSON. Yes, sir.

Mr. WALLACE. What is the proportion of attendants to patients in your institution?

Doctor HUTCHINSON. About 1 to 10.

Mr. SMYSER. I want to ask you just one or two questions, Doctor. The organic act providing for the creation of this institution out here authorizes the admission of the insane belonging to the Army and Navy, the Marine Corps, the Revenue-Cutter Service, the Public Health and Marine Hospital, civilians employed in the various departments of the Army, the indigent insane persons from the District, the inmates of various Soldiers' Homes throughout the country, and criminal insane and the insane criminals—in fact, substantially all of the insane of the District of Columbia. That would give such a class of patients as perhaps you have not in your institution, would it not?

Doctor HUTCHINSON. I think so, yes, sir.

Mr. SMYSER. And did you have that in mind when you said, considering the number and the class of the patients out at St. Elizabeth's, you regarded the institution as well conducted?

Doctor HUTCHINSON. Yes, sir; I had that in mind. I took all that into consideration yesterday, and talked it over with Doctor White and with Doctor O'Malley.

Mr. SMYSER. And the segregation, with the means at hand out there, of the classes of patients—2,600 in number—in your judgment, could not be improved upon?

Doctor HUTCHINSON. It is admirable. I do not see how it could be; no, sir. I think it is all right, Judge. That is my conviction.

Mr. SMYSER. Now, there is another thing. In your opinion, do there come times when physical restraint is an absolute necessity?

Doctor HUTCHINSON. I have listened to younger men in this business than I am talk, and tell that they are not having any restraints. They must have a different kind of human beings to deal with than I have. I can not get along without some restraints, and I am not ashamed to tell you that. It may be that I am old-fashioned, but I like a little restraint where it is judiciously used, with good judgment and common sense, by a physician.

Mr. SMYSER. What have you to say as to its use out at this institution?

Doctor HUTCHINSON. I was astonished at the small percentage of restraints that are used there. I think it speaks very well for the equipment and the management and the physicians of that hospital.

Mr. SMYSER. And from your observation, what do you say as to that institution being well managed?

Doctor HUTCHINSON. It is well managed. It is a good institution. I have only one criticism to make of it, and that is not the superintendent's fault. It is too large, and that he can not help. I am sorry it is so large. It is my opinion that the Government ought to have three or four institutions instead of one; but as long as you have this, you have a young man to manage it who is in good health, and he will manage it. I think he can do it. I would manage it.

Mr. SMYSER. You would not?

Doctor HUTCHINSON. I would. I would have it under my thumb.

Mr. SMYSER. And if you were called, with your experience, to the management of this institution, would you for a moment regard it as advisable to divide up the authority?

Doctor HUTCHINSON. No, sir; no, sir; no, sir. One man must be in control—one man must have the authority. If Doctor White has good heads of departments—for instance, the farmer, and the engineer, in the agricultural and mechanical departments—and they report to him, as they should, he should not have any trouble. It may be a little arduous for him, but that is his misfortune. He can stand it.

Mr. BARCHFELD. Doctor, what do you charge your private patients?

Doctor HUTCHINSON. We charge our private patients, and we have quite a number, \$7.50 as a minimum charge. It goes from that up to whatever they may be able to pay. We have them at \$25, \$40, and \$50 a week.

Mr. BARCHFELD. How many State patients have you at your institution, Doctor?

Doctor HUTCHINSON. We have about 800.

Mr. BARCHFELD. Eight hundred State patients?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. Then you have about 100 private patients?

Doctor HUTCHINSON. We only have about 100 private patients; yes, sir. My institution is spoiled by the State sending me so many State patients. It keeps many desirable patients from coming there on that account, and I frequently send desirable patients to other institutions where I think they can be done better by than I could do for them. I have done that repeatedly.

Mr. BARCHFELD. You frequently send patients from Dixmont to Marshalsea, do you not—State patients?

Doctor HUTCHINSON. They are transferred by the board of lunacy; yes, sir.

Mr. BARCHFELD. Then the patients that are brought to your institution, or sent there by the various counties and townships—

Doctor HUTCHINSON. That is right—

Mr. BARCHFELD. Do they send them from the 67 counties of the State?

Doctor HUTCHINSON. No, sir; only 13.

Mr. BARCHFELD. The western counties?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. How are they committed?

Doctor HUTCHINSON. They are committed by the order of the courts, by the directors of the poor, by the overseers of the poor, or by the commissioners, as the case may be.

Mr. BARCHFELD. There is no question about the sanity or the insanity of patients who are sent to you?

Doctor HUTCHINSON. I have never seen any; no sir. I have never had any difficulty along that line.

Mr. BARCHFELD. You, as a practical working head of an institution of that kind for so many years, do not believe the stories that people are committed to asylums just for the sake of committing them, whether they are sane or insane?

Doctor HUTCHINSON. There is nothing in that; no, sir; not in these days.

Mr. BARCHFELD. Do you have an inclosure to take care of a certain class of your patients, in the nature of exercise or recreation??

Doctor HUTCHINSON. There is not a fence on our property, except the boundary lines of our farm; that is all. That is a wire fence.

Mr. BARCHFELD. You saw that enclosure there yesterday around a certain portion of the hospital, a part of the buildings?

Doctor HUTCHINSON. Yes, sir.

Mr. BARCHFELD. Do you think that is objectionable?

Doctor HUTCHINSON. I would not care for it very much. I have not any such thing at my place.

Mr. BARCHFELD. Do you know the character of the patients who are confined there?

Doctor HUTCHINSON. I did not notice them particularly; no, sir. I supposed the fence was put there for a good reason and I did not question it.

Mr. BARCHFELD. It was put there to give them a certain amount of exercise, and to give them a pleasure ground.

Doctor HUTCHINSON. It may be that that is perfectly correct when you are in this vicinity in which you are.

The committee (at 12.40 o'clock p. m.) took a recess until 2 o'clock p. m.

#### AFTER RECESS.

The committee reassembled at the expiration of the recess.

#### TESTIMONY OF TIMOTHY E. M'GARR.

TIMOTHY E. MCGARR, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you reside?

Mr. MCGARR. At Albany, N. Y.

The CHAIRMAN. You are connected with the State board of lunacy, are you not?

Mr. MCGARR. Yes, sir.

The CHAIRMAN. In what position?

Mr. MCGARR. As secretary.

The CHAIRMAN. How long have you occupied that position?

Mr. MCGARR. Since the organization of the commission in 1889.

The CHAIRMAN. Have your duties required you to visit constantly the hospitals for the insane in New York City?

Mr. MCGARR. They have, in connection with other duties; yes, sir.

The CHAIRMAN. Did you visit the Government Hospital for the Insane here yesterday?

Mr. MCGARR. Yes, sir; I did.



The CHAIRMAN. Did you make as thorough examination as you could in the time you were there?

Mr. MCGARR. I think I obtained a comprehensive idea of the institution from my visitation of the wards in the different buildings.

The CHAIRMAN. What is your general opinion of the institution as a proper asylum for insane persons?

Mr. MCGARR. I think the Government is getting value received for all of its investments; and that in Doctor White it has a superintendent who is quite the equal of any that I know of in this country.

The CHAIRMAN. You knew Doctor White, of course, when he was at Binghamton?

Mr. MCGARR. I did; yes, sir.

The CHAIRMAN. How about the institution itself?

Mr. MCGARR. I should say that it was, in its possibilities and classifications of the different types that are committed there, pretty nearly ideal. There are only a few shortcomings that would strike an outsider. One is the absence of an appropriate place for the amusement and entertainment of patients. They have no adequate place, no appropriate place for amusement. In New York State also we think it well for the medical superintendent of an institution of that kind to be located outside of any of the buildings in which the insane are confined, but on the grounds however.

The CHAIRMAN. You mean to have a separate residence?

Mr. MCGARR. To have a separate residence. Outside of that, and a few minor things, I see nothing that would be open to criticism from a fair critic.

The CHAIRMAN. Why do you think it is advantageous for the superintendent to have a house separated from the buildings where the insane are?

Mr. MCGARR. The constant contact required of him with the insane during the working hours of the day really would seem to be about as much as could be expected of a man, and he should be able to lay down the burden to a certain extent at night. That is possible when he has a residence some distance removed from the ward, even though he be on the grounds.

The CHAIRMAN. You looked at the quarters that Doctor White occupied while you were there?

Mr. MCGARR. I did.

The CHAIRMAN. Is not that nearly as isolated as a building in the same grounds connected by telephone would be?

Mr. MCGARR. Scarcely. The wings running out from the main portion of the hospital contain patients, and unless they are carefully classified the noises and disturbances they would make would be a disturbing element to the resident superintendent.

The CHAIRMAN. That same idea would obtain with regard to the physicians and all those who have the immediate care of the insane.

Mr. MCGARR. Yes. In New York State they are erecting superintendents' as well as staff residences, both not very far away.

The CHAIRMAN. And you feel the same way in regard to the nurses, do you not?

Mr. MCGARR. Entirely so; the nurses more especially.

The CHAIRMAN. That is particularly true of the nurses over there, is it not?

Mr. McGARR. Particularly so.

The CHAIRMAN. The nurses' quarters, in other words, are admirable in St. Elizabeth's, are they not?

Mr. McGARR. They certainly are. I have never seen any better nurses' home than they have there.

The CHAIRMAN. In other words, your reason for this opinion is that any person who is constantly with persons who are demented ought to be, when they are off duty, in some place where they have as perfect rest and quiet as possible?

Mr. McGARR. I think that ultimately it inures to the benefit of the patients themselves. The doctor is fresher—

The CHAIRMAN. Do you not think that is, as a rule, more important with reference to nurses and attendants than it is with anybody else?

Mr. McGARR. That is quite true, and it is more true.

The CHAIRMAN. The people who are most with the insane are the people who most need the separation from the insane, when they are enjoying their hours of rest, whether sleeping or waking?

Mr. McGARR. Most assuredly that is a fact. A nurses' home is an absolute requisite.

The CHAIRMAN. And in that respect you think that St. Elizabeth's is well provided for, do you not?

Mr. McGARR. It is perfectly appointed, I think, in that line.

Mr. HAY. That only obtains as to those in this home. How about the other attendants?

Mr. McGARR. The nurses home accommodates the nurses on night duty and the nurses on day duty there, I take it; and if they do not all occupy that home when they are off duty some equivalent is provided.

Mr. HAY. You know that only obtains there as to female nurses?

Mr. McGARR. The only home I saw over there was for female nurses, and it is a great pity there is not one for the men.

The CHAIRMAN. In other words, if you wanted to make it perfect, you would start out by having a separate home for the attendants who have to stay on the grounds at night?

Mr. McGARR. Most assuredly.

The CHAIRMAN. In regard to the separation of the different classes of people, do you think that is carried on to a sufficiently great extent there?

Mr. McGARR. They are better off there than we are in most of our institutions in New York, and we are certainly trying to keep abreast of the times. The separation of epileptics and the separation of the acute and curable patients there is almost ideal. The arrangement of small wards there and the administration is pretty nearly perfect.

The CHAIRMAN. The reason that is advantageous is, I suppose, because of the fact that one patient may be disturbed by another one?

Mr. McGARR. Yes; they have structural arrangements there that are admirable. Even for the class of acute and incurable insane they have some arrangements there by reason of which even disturbed people of that class do not affect those a very short distance away, by the separation of corridors, etc. I also went over the building in which the criminal insane are confined and I went through that. I was very much interested in that building. I found it in very satisfactory condition as to cleanliness and order, and the

care exercised by the attendants. It was remarkably cleanly. We have, in our State, two institutions of that kind, one of them for insane convicts, who have become insane after conviction and commitment to the State prison.

The CHAIRMAN. That is at Matteawan?

Mr. MCGARR. No, sir; that is at Dannemora. Matteawan is largely for court cases and those of criminal tendencies.

The CHAIRMAN. How does it compare with the institution at Ward's Island, New York?

Mr. MCGARR. Of course one has to take into consideration the overcrowding of the wards at Ward's Island. They are 30 per cent overcrowded at the present time, and the conditions there are not ideal. But we have a fine building for the acute insane, and outside of the overcrowding of them I would not be afraid to compare it with your Washington hospital. Certainly the Washington hospital is not behind us, and if we did not have this overcrowded condition we might perhaps be equal to the building here.

The CHAIRMAN. How about the one at Central Islip?

Mr. MCGARR. That is entirely different. There we have a great many chronic patients. We have there 3,800 patients, and of that number 3,000, or nearly 3,000, are chronic and incurable cases.

The CHAIRMAN. Doctor Smith told me that he could not come here to-day to give testimony, because the New York board was going to examine them this week.

Mr. MCGARR. That is why I am trying to get an early hearing, in order to go there myself.

The CHAIRMAN. In the institution at Islip are there not a larger proportion of patients who work outdoors?

Mr. MCGARR. Yes. Doctor Smith is an exceptional man in that respect. He really has a very great reputation for getting his patients to work. They are a very active staff over there, and Doctor Smith, who had to organize two or three of these institutions, has developed especially along that line. He gets his patients out, and they do an enormous amount of grading. I regret to say that the soil there is none too good, as you probably know, as it is largely sandy.

The CHAIRMAN. And yet Long Island is the greatest vegetable garden in the world.

Mr. MCGARR. Yes; we get a great many vegetables, but potatoes can not be grown there with any success.

The CHAIRMAN. Let me ask you the general question: How do you think the institution at St. Elizabeth's, taken as a whole, compares with the best of the institutions in the State of New York?

Mr. MCGARR. I do not think you have an ideal arrangement here by having a lot of land four or five miles away.

The CHAIRMAN. In other words, you think that if they are going to utilize the farm to the greatest extent and benefit to the patients, by making them do outside work, it ought to be nearer at hand?

Mr. MCGARR. It certainly should. I think that is an unfortunate arrangement. The nearest approach to it in New York State is at Poughkeepsie, where we have eight cottages on Fallkill Creek, nearly 4 miles away from the main building, but we have a separate administration out there on that farm, and the farm—the garden, especially—is cultivated by these patients very successfully.

We have very good results there. We are now putting the tubercular patients out there, because of the great facilities for outdoor work and exercise. But, generally speaking, you can not get your farm people out there and back. That is not a desirable thing at all. It would be necessary for you to put up some buildings out there, in order to get any real advantage out of working that farm.

The CHAIRMAN. Of course when you say "advantage" you mean advantage to the patients, enabling them to do outdoor work?

Mr. McGARR. Yes; and material advantage to the institution in the results obtained from the farm.

The CHAIRMAN. From your examination of St. Elizabeth's and the experience you have had in the examination of institutions generally throughout New York State, do you consider the Government Hospital for the Insane as up to date and abreast of the times?

Mr. McGARR. I should say it was, and it is very favorably located just now, for the reason that there is no overcrowding there. You have great possibilities, and that is the thing that impressed me most, and I think everyone connected with the Government should congratulate himself on having an institution there in which there is not a case of overcrowding. That is the first thing that impressed me, and the finest thing the Government has provided, generally speaking. That is the greatest advantage you have at the present time. I should say that the institution was fully abreast of the times, and I would go a little beyond that and say that Doctor White seems to have the ability to keep the institution well in the medical mind, by reason of his scientific qualifications as a psychologist and writer on psychological questions. He has not, as I remember, done so much in articles upon the administration of buildings, but perhaps his work speaks for itself.

The CHAIRMAN. What do you think in regard to the propriety of having one man the head of the medical department and the general administration of the buildings? How does that work in New York? Is Doctor Smith, for instance, the head at Islip, having just about the same character of work as Doctor White does?

Mr. McGARR. Precisely.

The CHAIRMAN. And all these superintendents of the New York hospitals?

Mr. McGARR. All of the superintendents, without exception. We are opposed to anything different from that.

The CHAIRMAN. Why?

Mr. McGARR. We believe that there should be one supreme head. We are familiar with the experiments that have been made in the past, and some that now exist in New Jersey, as Doctor Evans will tell you, but it is such a temptation to conflict of authority that we do not consider it advisable, and it ultimately comes down to the patients themselves and causes a deprivation to them. The medical man will, perhaps, prescribe for a dying case. Perhaps the man needs special delicacies, and he will prescribe such things. The business director, as he is sometimes called, or the business manager, will say: "We have got no money for anything of that kind; I can't afford to buy anything of that sort." So the patient's life will not be saved. That, to be sure, is an extreme case. The medical man does not in practice, in our State, interfere or permit his time to be taken up by business matters. He has a steward in

each of our institutions, and the statutory duties of the steward are to look after the farm and grounds and the purchases. Under our general regulations we regulate all purchases ourselves. In some cases he even looks after the engagement of nurses and attendants, although not frequently. The doctor usually does that.

Nevertheless the superintendent is the supreme head. He has reports come to him daily from the heads of departments, and does not pretend to scarcely any case to interfere with business matters or anything on the outside. He has a purely medical sphere.

The CHAIRMAN. But still you say that the superintendent in the New York hospitals is responsible; he is the supreme head; he is the man who overcomes the command of the steward or anybody else?

Mr. MCGARR. Yes; he is the supreme head.

The CHAIRMAN. Did you visit the kitchen department of the hospital?

Mr. MCGARR. No, sir; I saw but one of them.

The CHAIRMAN. Did you go into what is known as the general kitchen?

Mr. MCGARR. No; I did not see that.

The CHAIRMAN. What is the arrangement in some of the largest institutions in New York in regard to the kitchens? Are the meals cooked in a general kitchen and distributed from there?

Mr. MCGARR. It differs widely. In our Ogdensburg hospital we have a very large kitchen, and from there the food supplies are distributed on food cars through conduits to the various buildings. That applies to all except one—I believe there is one exception. So it is at Utica and some others. But at many others they prefer to have little separate kitchens and dining rooms. That is the case at the very large institution at Willard. There are a great many separate kitchens and dining rooms there.

The CHAIRMAN. Which do you think is the better plan?

Mr. MCGARR. It depends altogether on the question of service of the food. If you can work a perfect service from a large kitchen, so as to bring food to the patients hot, that would be the most economical. The number of cooks, helpers, and people of that kind could be kept down. If you have separate kitchens, as you can see, you have to have separate waiters, separate cooks and assistant cooks, and all that. But, as I understand it, the consensus of opinion among superintendents is that if the money appropriated is sufficient the ideal way would be to have small separate establishments.

Mr. HAY. In other words, you could serve the food in a more palatable way?

Mr. MCGARR. Hot, and in a more palatable way.

The CHAIRMAN. In the large institutions in New York they have steam tables, do they not?

Mr. MCGARR. Yes; that is an absolute requisite nowadays. Those things are looked after; but even with them, if you had a remote ward, you may find the food badly served.

The CHAIRMAN. So that, unless you take into consideration the economy of administration, you believe in having kitchens in each separate building?

Mr. MCGARR. Yes, sir; I would, indeed.

The CHAIRMAN. Do you know anything whatever about the food at St. Elizabeth's?

Mr. McGARR. Yes, sir; I saw it on Sunday. In going about visiting the wards I saw the patients eating there.

The CHAIRMAN. How did it impress you?

Mr. McGARR. I think you have an excellent diet there. I am afraid it is a little better than ours in New York State.

The CHAIRMAN. I do not like to hear you say that.

Mr. McGARR. I think ours is pretty good. I think ours is entirely adequate. In New York we have to differentiate in the dietary. We have one dietary for acute incurable cases, and we have a dietary for the sick people and infirm, and a dietary for the epileptics—all different.

The CHAIRMAN. Were you in the general dining room at St. Elizabeth's, the one that is large enough to accommodate six or seven hundred people?

Mr. McGARR. No, sir; I was not.

The CHAIRMAN. Take Wards Island, for instance; is there a large separate dining room there?

Mr. McGARR. The buildings are separated over there; with the exception of one over there, with a conduit, I do not think we have any general service. We have one there for the acute insane fresh cases, which accommodates about 315 patients. In that we have a separate culinary establishment—kitchen and dining room—entirely separate. In the Ver Planck Building we have another one. I think perhaps in those large establishments on Wards Island we have perhaps four large kitchens in the five or six buildings.

The CHAIRMAN. How many people are there at Wards Island?

Mr. McGARR. 4,300.

The CHAIRMAN. Is there, in that institution, a general receiving hospital for the cases; are they taken over to Wards Island in the first instance?

Mr. McGARR. They are taken from the Bellevue detention building for the insane. They are sent there at the magistrates' order to be examined as to their sanity. They are then taken up to our boat from Twenty-sixth street, at the Manhattan Hospital dock. Most of them are received and committed to that special building for the acute insane and the incurable cases.

They are very carefully studied. They make analyses of the blood and secretions. It is pretty quickly determined where they belong—that is, whether they are appropriate cases for retention in that acute hospital for constant and active treatment, or whether they are appropriate for the old men's quarters, the infirm quarters, or the epileptic.

The CHAIRMAN. How long do they usually retain patients in this reception ward or building?

Mr. McGARR. It depends entirely upon their prospects. They determine that very quickly, usually within a week. Do you mean in the Bellevue detention building?

The CHAIRMAN. No; I am speaking now about Wards Island.

Mr. McGARR. Cases are pretty quickly diagnosed, and if it is determined that they are favorable cases, they are retained in the building all the time, given electro-therapeutic and hydro-therapeutic treatment, and everything that can be brought to bear to bring about the restoration of the patient. Night and day attention is given to every symptom. Charts are kept with the greatest care by the best

trained nurses we can find, and we leave no stone unturned to cure a patient who is brought there.

The CHAIRMAN. You speak of the hydro-therapeutic system. Is the plant for such work as that as good in St. Elizabeth's as it is in some of the institutions in New York?

Mr. MCGARR. Yes, sir; it is quite as good. They have an admirable arrangement here. I was delighted to see it so perfect. It must be a very recent installation. We are up-to-date entirely in that line in New York.

The CHAIRMAN. Is this institution as good as the ones which you say are up-to-date in New York?

Mr. MCGARR. Quite as good; it must be a very recent plant.

The CHAIRMAN. I notice in one of the papers that the board of estimates and apportionments recently made an appropriation for building a large receiving hospital on Manhattan Island?

Mr. MCGARR. Yes.

The CHAIRMAN. Is that to take the place of the one that is on Wards Island.

Mr. MCGARR. No; that may supplant the detention pavilion. That is a State appropriation. The board of apportionment gave us the site and we put up the building. It is going to cost us about \$300,000 for about 150 patients. That will be for suspected cases of insanity, as well as for acute cases of actual insanity. It is located in the city in order to place people immediately under active treatment. We hope that by its operation the cases of patients who are in a developmental stage, and are really on the border line presenting some marked symptoms, may be placed there immediately and placed under active treatment such as is now given on Wards Island, and not place upon them the so-called stigma of insanity. They will receive their treatment just as they do in the general hospitals. We hope to have them there and give them a more or less prolonged course of treatment and dismiss them, without any red-tape at all, of any kind, taking them in and sending them out.

The CHAIRMAN. In other words, they will go there without having been absolutely committed as insane persons?

Mr. MCGARR. There will not be any commitment at all at that place.

The CHAIRMAN. The idea of that, of course, is for the particular benefit of the patients, or for the people, as you call them, who are suspected.

Mr. MCGARR. Yes; but we hope that the ultimate advantage will be to the people of New York. We hope that a lot of those cases which are running around the streets just beginning to show insanity, by reason of having had the treatment at once will be absolutely carried over their temporary disturbance; whereas, if they go down to Wards Island for treatment the superintendent will be loath to discharge them, especially so close to a great city like New York, until he is absolutely certain that there is no taint of it left in him, not a particle of insanity. The great newspapers there are only too anxious to criticise a superintendent. We think this is going to fill a very important field.

The CHAIRMAN. If you were given the task of making improvements in the Government Hospital for the Insane, what improvements would you suggest?

Mr. McGARR. I would want to do something about the farm work at once. I should put up some buildings there where the farm is located, and should run some kind of a supply station there, having the supplies all come from the main house. From an administrative and business point of view, considering the class of patients you take care of, I can not see that you have very much to change. It may be argued that you have more attendants than are required, and possibly your proportion of attendants is somewhat large. I do not know that it is.

Doctor Hutchinson testified this morning that he thought that was where the Government Hospital was ahead of him. But there may be such a thing as having too many attendants, sometimes, I think. Of course I do not mean in the ward service. I do not think he has got too many there, but he may have too many people in the other departments.

Mr. HAY. You mean employed around the grounds?

Mr. McGARR. Yes. I doubt if you can get too many nurses and caretakers. I do not know whether that criticism has been made on the administration here, but possibly there is a slight excess of employees there. If I went into that thing I should want to know more about that.

The CHAIRMAN. Will you take one of the large institutions that you know of, and state what is the comparison between attendants and nurses and patients? When I say that I mean the people who absolutely have charge of the insane patients.

Mr. McGARR. In general we have 1 to every 8 or 9, but it varies. We can not fill our vacancies at all.

The CHAIRMAN. Just upon that point: How do the superintendents of the several institutions in New York appoint their nurses and attendants?

Mr. McGARR. We have a noncompetitive examination. A person applies, and we have a local civil-service examination board, consisting of the bookkeeper and some member of the force, and the applicant passes a noncompetitive simple examination in elemental things.

The CHAIRMAN. That means that the superintendent has practically the control of appointments of attendants and nurses?

Mr. McGARR. Yes, sir; he has full control.

The CHAIRMAN. In other words, the local civil-service board is not much more than a registry office?

Mr. McGARR. That is all, sir.

The CHAIRMAN. For instance, how many employees are there in Wards Island, which has 4,800 patients?

Mr. McGARR. Do you mean employees altogether?

The CHAIRMAN. Yes; I was going to ask you to divide that afterwards.

Mr. McGARR. We have altogether 720.

The CHAIRMAN. Does that include nurses and attendants and employees?

Mr. McGARR. That includes everybody employed.

Mr. HAY. Superintendents, physicians, and everybody?

Mr. McGARR. Everything. The proportion is about five and a half to one.

The CHAIRMAN. You say there are 4,800 patients there?

Mr. McGARR. No, sir; 4,300.



The CHAIRMAN. I should think that would be about one to six.

Mr. McGARR. Yes; it would be close to one to six.

The CHAIRMAN. How many of the 720 are nurses and ward attendants?

Mr. McGARR. I think the ratio of attendants and nurses on Wards Island, is one to eight and a half; but I want to say that although it is less than one to nine, we have not been able ever to fill our vacancies. We have a number of vacancies now. Our proportion ought to be about one to eight.

The CHAIRMAN. Do you mean to say that is because it is difficult to get people to take the employment?

Mr. McGARR. Yes, sir; we have increased the wages of all these people 25 per cent, and we can not get them.

The CHAIRMAN. How much do they get?

Mr. McGARR. The women nurses begin at \$16 a month.

The CHAIRMAN. How high do they go?

Mr. McGARR. They go up to about \$30 a month, when they become trained nurses; but they must pass through a two years' course in the training school to reach that. They do not get such pay until they do that.

The CHAIRMAN. Are there training schools in all these institutions in New York?

Mr. McGARR. Yes; that is a matter of statutory requirement now.

The CHAIRMAN. How about the male attendants; what do they get?

Mr. McGARR. They begin at \$22 a month.

The CHAIRMAN. How high do they get?

Mr. McGARR. Without passing through the training school they get \$28 a month, and then if they pass through the training school they get the maximum as special attendants or supervisors. We pay the chief supervisor \$50 a month. That is about as high as anyone in that line can go.

The CHAIRMAN. Did you look into the question as to the number of attendants there were on the wards at St. Elizabeth's?

Mr. McGARR. I observed that generally; but I did not ask for any special information.

The CHAIRMAN. You did not get any data particularly?

Mr. McGARR. No, sir.

The CHAIRMAN. How about the time that the attendants in the New York institutions are actually on duty?

Mr. McGARR. They average thirteen hours a day—twelve hours one day and fourteen the next.

The CHAIRMAN. How much time do they have off?

Mr. McGARR. They have every fourth Sunday, as I remember it, and they have fourteen days' vacation every year. There is no regulation that we have made as to evenings out. Every superintendent is rather a law unto himself in that regard, and he manages according to the number of his attendants and nurses.

The CHAIRMAN. That means, with the exception of every fourth Sunday and fourteen days' vacation, all the nurses and attendants are practically on duty all the time unless they get permission to leave the house?

Mr. McGARR. They always have a part of a holiday; but they have to divide that up among themselves.

The CHAIRMAN. Who fixes their compensation?

Mr. McGARR. The lunacy commission fixes that.

The CHAIRMAN. How many institutions has the lunacy commission under its control?

Mr. McGARR. Thirteen.

The CHAIRMAN. Does that mean public institutions, or public and private both?

Mr. McGARR. I thought you meant under our control. Under our control and supervision we have 39—13 State institutions and 25 private institutions—including the large Bloomingdale Asylum, which takes some public patients from the city of New York.

The CHAIRMAN. How are the appropriations made for those several institutions?

Mr. McGARR. Up to recently we were given the results of a certain portion of the State tax—one-third of a mill; but at present they differentiate the appropriations. Last year, for instance, I will give you the correct figures. For officers' salaries we got \$270,000, to apply all over the State. For wages of employees we got \$1,795,000—for all employees of whatsoever kind or nature. For what I call supplies, comprising everything outside of the other two subdivisions, we got \$2,600,000 plus \$280,000 which we received from the board of patients. We have to turn everything in the State treasury in the way of receipts, and we have it reappropriated. We have a general law that every receipt must be covered into the State treasury.

The CHAIRMAN. You mean, that is money you receive from patients who pay in the public institutions?

Mr. McGARR. Yes, sir.

The CHAIRMAN. In other words, you turn it back and then expend the appropriation made by the legislature?

Mr. McGARR. Yes, sir; we get credit for that. We had \$2,600,000 plus \$280,000 for general supplies of every nature—clothing, coal, medical supplies, and so forth.

The CHAIRMAN. That is \$2,880,000?

Mr. McGARR. Yes. I would like to go on now for a moment and speak of the improvements and how they are made. Until last year we were paid a lump sum for improvements, to be spent as we desired. Last year they preferred to begin a system of differentiating by institutions, and then taking the larger items and specifying them—so much for a power plant, so much for a hydrotherapeutic installation, and so forth. That is the way it is now.

The CHAIRMAN. That is all fixed by the State board?

Mr. McGARR. It is fixed by the legislature now.

The CHAIRMAN. The legislature does not say that it will appropriate so much for Dannemora, and so much for Islip, and so much for Wards Island?

Mr. McGARR. For extraordinary improvements only.

The CHAIRMAN. You get a lump sum and it is the duty of the State board of lunacy to distribute it among the several institutions?

Mr. McGARR. That is quite right.

The CHAIRMAN. Of how many people does that board consist?

Mr. McGARR. Three.

The CHAIRMAN. Are they salaried officials?

Mr. McGARR. They are.

The CHAIRMAN. How often are investigations made of the several public institutions?

Mr. McGARR. I would prefer to call them inspections. Under the statutory requirement they have to be made twice a year, and the medical commissioner, assisted by an officer known as the medical inspector, is making inspections all the time. The medical inspector goes to the western part of the State and then he turns around and comes right back over a different line of railroad.

The CHAIRMAN. Do they know beforehand when your board is going to inspect them?

Mr. McGARR. Ordinarily we give them an hour or two of notice. We tell them we are coming on such a train, so that the carriage can meet us.

The CHAIRMAN. So that they are under a constant surveillance, with no idea just when you are going to drop down on them?

Mr. McGARR. Yes; and then in addition there is the State Charity Association, and they are constantly going.

The CHAIRMAN. That is a private institution?

Mr. McGARR. That is a private benevolent association.

Mr. HAY. They have access to all of these institutions?

Mr. McGARR. Yes, sir.

The CHAIRMAN. They have the statutory right to go into all institutions; in other words, they could not be denied admittance?

Mr. McGARR. That is a part of the statute. If you will permit me, I want to correct the statement I made about the hours and days of duty of the attendants. Nurses and attendants have an annual vacation of fourteen days. They have each fourteenth day off, after the morning's work is performed, and also each third Sunday. Night nurses and attendants are not entitled to the fourteenth day.

The CHAIRMAN. So that they are entitled to the fourth Sunday—

Mr. McGARR. Every third Sunday. I made that change in my previous statement.

The CHAIRMAN. Now, about the per capita cost of the institutions in New York State. They vary greatly, do they not?

Mr. McGARR. Yes; they do, owing to their size.

The CHAIRMAN. What is their average per capita?

Mr. McGARR. I should say the average would run from \$140 to \$182 per annum.

Mr. HAY. What institution in the State of New York compares most closely with the institution we have here, in size?

Mr. McGARR. That would be Kings Park.

Mr. HAY. How many have they there?

Mr. McGARR. They have 2,700 at Kings Park.

Mr. HAY. What does it cost a year to carry on Kings Park?

Mr. McGARR. I do not think I have the figures for that; but I can tell very closely. It costs at Kings Park, excluding extraordinary improvements, about \$3.40 a week.

Mr. HAY. What is the superintendent paid at Kings Park?

Mr. McGARR. All of our superintendents are under a general salary schedule. They begin at \$3,500 a year and increase at the rate of \$100 per annum until they have been in service ten years, when they get the maximum, \$4,500.

The CHAIRMAN. They all have their living out of the institution, do they not?

Mr. McGARR. Yes.

The CHAIRMAN. And their servants; do they not?

Mr. McGARR. Yes.

The CHAIRMAN. And their necessary horses and carriages?

Mr. McGARR. Yes, sir; everything of that kind.

Mr. HAY. How often does the superintendent at Kings Park and Wards Island, and the other State institutions, go through the wards?

Mr. McGARR. Generally speaking, he would average finishing all the buildings and all wards and seeing the patients once a week.

Mr. HAY. How many assistants has the superintendent at Kings Park?

Mr. McGARR. There must be fourteen people at the present time, including the superintendent; fourteen physicians that are on the pay roll.

Mr. HAY. At each of those institutions?

Mr. McGARR. No; at Kings Park. Then they have what we call clinical assistants, who are not paid but do render service.

Mr. HAY. But there are fourteen paid physicians on the staff?

Mr. McGARR. Yes. I gave that from memory; but I see it is exactly right.

The CHAIRMAN. How many of these clinical assistants are there who are not paid?

Mr. McGARR. Each institution tries to get hold of these young fellows just out of college but do not always succeed. Each one is entitled to have two. We regulate it, because we do not want a lot of them boarding at the expense of the State. We want to be sure that they are doing good work. So we limit them to two in each one of the Metropolitan districts.

Mr. HAY. Just what are your duties as secretary of the board?

Mr. McGARR. I am secretary and executive officer of the State commission of lunacy. I carry out all of the executive work, which, by law, is imposed upon them. We have the prime duty of examining these institutions and the patients therein, and of protecting the rights of the patients, and of seeing that they and their friends have a court of appeal to which they may come at any time. They may ask us to investigate and we do it, not only personally but through the medical inspector who is sent out first to get all the preliminary information, if there is a serious case. We license all private institutions. We have the very important duty of passing upon every requisition of whatever kind or nature for supplies.

In the State hospitals every salary is fixed by us—the wages of all classes of attendants. We have requisitions coming in there and they are carefully revised and the prices scrutinized and the quality of goods examined. We do not undertake to make contracts, but we supervise the making of contracts, and see that each institution acts according to law, and under some general regulations which we make.

Mr. HAY. What is your opinion as to the importance of a State having a lunacy commission?

Mr. McGARR. If you should put it to a vote of the people who are personally affected in the State of New York I think you would have a unanimous verdict that they are satisfied with the lunacy commission.

Mr. HAY. You have spoken of supplies. Do you get all of your

supplies for the State institutions under contract, or are some of them bought in the open market?

Mr. MCGARR. Some of them have to be bought in the open market.

Mr. HAY. What character of supplies is bought in the open market, without a competitive bid?

Mr. MCGARR. There are a great many of the medicines.

Mr. HAY. How about clothing?

Mr. MCGARR. The clothing is manufactured by the prisons in our State—practically all of the clothing. Some of the institutions have a pretty fair tailoring establishment and make their own clothing. The material or cloth is furnished by the prisons and we have to pay their price. They fix the price and we pay it. They make shoes almost exclusively for our institutions in the prisons.

Mr. HAY. So that the shoes and the clothing are made by some other institution in the State of New York and supplied to these institutions?

Mr. MCGARR. Yes, sir.

The CHAIRMAN. Is the amount that is paid for clothing and for shoes charged against the appropriation for the care of the insane?

Mr. MCGARR. Yes; that comes in.

The CHAIRMAN. So that is included in the per capita cost?

Mr. MCGARR. Yes, sir; in our per capita cost.

Mr. HAY. I understood you to say that you had separate food for each class of these people?

Mr. MCGARR. Yes, sir; we endeavor to do that. We have no system about that in all of the institutions. But, for instance, in an institution having a considerable number of chronic and infirm and bed-ridden cases they will not supply to those patients the dietary that is given to curable cases.

Mr. HAY. How about the food for epileptics?

Mr. MCGARR. That is a special diet in every institution, practically. They give them no meat, you know.

Mr. HAY. What do you say about the advisability of having a separate institution for people of that class?

Mr. MCGARR. We have, in our State, an institution for epileptics not insane, and we would like to have an additional one for insane epileptics. As Doctor Hutchinson very properly said in his testimony, that ought to be done not only for the sake of the epileptics themselves, but for the sake of the fellows who are around them. They are a very dangerous class and absolutely incurable.

Mr. SMYSER. Mr. McGarr, do you realize that while you have in these various institutions in New York to which you are assigned all sorts of insane people, all those sorts are confined in one institution here?

Mr. MCGARR. Yes; and that makes it a particularly difficult proposition here.

Mr. SMYSER. Would that not increase the difficulty of supervision and management?

Mr. MCGARR. There is not the slightest doubt about it.

Mr. SMYSER. You have given your time to the investigation of these institutions in New York State for years and years?

Mr. MCGARR. Yes, sir.

Mr. SMYSER. Do you ever have trouble or complaints over there about the mistreatment of patients?

Mr. MCGARR. I think scarcely a day passes by without there coming to my desk one or two or three complaints of that kind.

Mr. SMYSER. As to the cruelty of attendants?

Mr. MCGARR. Yes, sir.

Mr. SMYSER. And complaints about the food?

Mr. MCGARR. Yes.

Mr. SMYSER. And things of that kind?

Mr. MCGARR. Yes, sir.

Mr. SMYSER. Can that well be avoided?

Mr. MCGARR. No, sir; not at all. In all institutions, as long as you have lunatic asylums, you are bound to have that condition.

Mr. SMYSER. It is just as likely to happen out here at St. Elizabeth's as it is over in New York?

Mr. MCGARR. Rather more so, because of the class you have over there. I think that most of the old soldiers are a complaining class, as we see them in our institutions. I do not know whether it is due to the fact that they have been coddled in the Soldiers' Homes or not.

Mr. SMYSER. What do you call your institutions—hospitals or asylums?

Mr. MCGARR. Always hospitals.

Mr. SMYSER. When did you begin that?

Mr. MCGARR. About thirteen years ago.

Mr. SMYSER. Did you change the name by act of the legislature?

Mr. MCGARR. Yes, sir.

Mr. SMYSER. What was that done for?

Mr. MCGARR. Simply for the moral effect of it. We believed at the time, also, that we were approximating general hospitals. We had established training schools and we had trained nurses who would compare favorably with any trained nurses on the outside, and having nurses of that grade we believed we were entitled to call ourselves hospitals.

Mr. SMYSER. From your years of experience, I take it that the board of which you are a member have looked into the question as to whether or not the hours of the attendants were too long.

Mr. MCGARR. Yes, sir; that has been a hot question with us for two or three years.

Mr. SMYSER. Have your board been able to devise any system by which the hours of the attendants could be shortened?

Mr. MCGARR. Not with the appropriations which the legislature gives us. The life of the attendant, by and large, while it may be said to be difficult, and at times dangerous, is not at all times a severe one. The thirteen hours which the average attendant works run something like this: At 6 he gets his patients up and gets them into breakfast. On difficult wards he has a lot of help.

Then after breakfast they have a special corps for cleaning up the dining room, and the nurses and attendants arrange to take out the patients in working squads on the farm, or in the garden, or to the shoe rooms or mattress rooms or bedrooms, where they are at work. They go slowly and leisurely about that and get out there about half past 8 or 9 o'clock. Then they come in at 11 o'clock and they call that a half a days' work. Then their time is usually their own until dinner or about half past 1 or 2 o'clock. Then they take them out again in the same way, in walking parties and working parties. They have really considerable leisure to themselves. On the short

day they are off about 6 o'clock, and on the long day they are off at 8, although sometimes they are on until 10. It depends upon how things are going at the hospital—upon local conditions.

Until this year we have not had any definite attempt on the part of the attendants to get legislation for themselves, but this year they came in with a bill providing for a twelve-hour day. They thought they could get that easily enough, so they amended the bill and made it a ten-hour day. They progressed with that for some distance, but when we pointed out to the committee that if they were going to pass that law they would have to add a large amount to our annual appropriation, the thing fell off in interest to the members.

Mr. SMYSER. Do you have any difficulty in getting increased appropriations?

Mr. McGARR. Indeed I do.

Mr. SMYSER. I want the benefit of your judgment, for I am satisfied that your commission has given this matter great consideration. With the appropriations that you have, do you feel that the hours required of the attendants are excessive?

Mr. McGARR. No, sir; I do not. I think that in one or two of our hospitals the local conditions are such as to inure really to the detriment of the nurses and the attendants. They have had too long hours; but that is only local. They have had the money if they could get the people there.

Mr. SMYSER. The trouble was in getting a supply of attendants?

Mr. McGARR. In getting the supply; that is the very point.

Mr. SMYSER. It has been suggested to me that you use the strait-jacket in all of your institutions; how about that?

Mr. McGARR. I have not seen it in a long time—not that we would hesitate, in certain cases, to use it.

Mr. SMYSER. Do you have means of restraint?

Mr. McGARR. We certainly have. We apply it to the smallest possible extent. We seclude patients also. With regard to restraint, we believe that rather than let a man pluck out his eyes or fearfully mutilate himself, as they will do occasionally, it is better to temporarily apply, during the furor, restraint.

Mr. SMYSER. Would your judgment be that such means of restraint are appropriate and proper in all such institutions?

Mr. McGARR. I certainly believe so.

Mr. SMYSER. From your experience, what do you say as to the proper use of such means of restraint?

Mr. McGARR. I think that rather than have four or five men engaged in a struggle with a patient, as they do in certain hospitals, it is far better to have the physician see the patient and issue a formal order for the application of restraint, and let him stay in it until his excitement is over. In our State we have a system, which we are trying, of submerging patients in tepid water for long periods of time. We put them in a bath tub so arranged that their head is constantly out of water and a nurse not far away, and we leave them in the tepid water.

Mr. SMYSER. I suppose there are some people so opposed to bathing that they would object to this as a means of restraint; are there not?

Mr. McGARR. I presume you could find them.

Mr. SMYSER. That is done for the good of the patient, is it not?

Mr. McGARR. Yes; that quiets an excited patient.

Mr. SMYSER. Do you think there is anything cruel about it?

Mr. McGARR. On the contrary, I think it is humane.

Mr. SMYSER. You were here this morning and you heard what happened at St. Elizabeth's a few days ago. From your experience, what do you say about the treatment of that man, Mr. Gartrell?

Mr. McGARR. I began my service with institutions for the insane thirty years ago, and I have seen the insane in all grades of maniacal fury. I know, from the class of patients that he belongs to, that nothing else could have been done in his case. The doctor, of course, should have been summoned at once and he should have, as was done immediately afterwards, issued an order for the special application of restraint. The young doctor, or the young assistant, gave you a word picture of that, and you could not have anything better. Everything was done there. The attendant here impressed me as telling the absolute truth and just as it was. You have to apply force, not violence. They applied force; but they were not violent.

Mr. SMYSER. Is that a proper distinction?

Mr. McGARR. I think it is. The insane are a constant wrecking party, and they leave the attendants and all the other people around the ward in their wreckage.

Mr. SMYSER. Is it your opinion that this institution out here has kept abreast of the times in the abandonment of restraint and the adoption of outdoor treatment, etc.?

Mr. McGARR. I would like to know more about the outdoor treatment before I answer that. I saw a great number of the patients going out, to and fro, and walking, and that there was a large amount of freedom. I saw open doors over there, and everything seemed to indicate that they were given just as great a degree of freedom as their cases would permit; but I would not like to speak definitely on that unless I saw all classes, and saw how they were treated.

Mr. SMYSER. Of course your examination was somewhat hurried; but you have been in the business long enough to be able to diagnose a situation pretty readily?

Mr. McGARR. I think I could see any marked defects immediately.

The CHAIRMAN. From your examination, what do you think generally of the character of the attendants and nurses whom you saw there?

Mr. McGARR. Speaking specially in the most difficult part of the building, the criminal building, I will say that I went over there especially to study that and see what class of people they could get down here to look after them. I saw some gigantic sailors over there and some big soldiers; and I thought I would just like to see what kind of fellows went up against those inmates. I was astonished to see the ease with which they managed them. Ordinarily a soldier or a sailor, who has gone all around the world, picks up the possibility of tremendous damage to the community.

The CHAIRMAN. He runs amuck?

Mr. McGARR. He runs amuck. I think those people are really as nearly contented as you could find that class of people anywhere. I spoke to several of them, colored and white, and I could not find that they had any complaints to make. I spoke to them apart from the doctor. I talked with the attendants.



The CHAIRMAN. You spoke a moment ago of the State of New York having a separate building for the insane epileptics.

Mr. McGARR. No; I said that we want one.

The CHAIRMAN. You have one for epileptics?

Mr. McGARR. Yes, sir.

The CHAIRMAN. What is the difference between an insane epileptic and an epileptic. Do some people still maintain their mental faculties and yet suffer from epilepsy?

Mr. McGARR. Of course epilepsy, long continued, will cause enfeeblement of the mind; but an epileptic may go along without any very marked mental disturbance for a great many years. Those people up at the Craig colony, as we call it, do very well up there in the small houses. We bought out the Shakers' houses there.

The CHAIRMAN. Where is that?

Mr. McGARR. Up in the neighborhood of Geneseo and around there. We bought out that community and improved it a great deal. We took a great number of them out of the poorhouses, where they were absolutely neglected and worse than neglected—abused. We have got nearly all of them out of the poorhouses. They are not under our control; but we have a sort of friendly interest in them.

The CHAIRMAN. Under whose control are they?

Mr. McGARR. They are under the State board of charities as to their commitment, discharge, transfer, etc.; but under the fiscal supervisor of State charities as to their financial control.

The CHAIRMAN. You say you are now trying to get a separate establishment for the insane epileptics.

Mr. McGARR. Yes; the movement has not been very rapid this last year; but we have taken some action about it.

The CHAIRMAN. I would like to help you in that.

Mr. McGARR. I do not know who would want to be superintendent of it.

The CHAIRMAN. You think it would be an advantageous thing to have a separate building at St. Elizabeth's for insane epileptics?

Mr. McGARR. Yes; they ought to be kept by themselves absolutely. An insane epileptic has no business with the other classes.

The CHAIRMAN. When you were at St. Elizabeth's did anybody show you what has been called the "bull pen?"

Mr. McGARR. I saw that inclosure, if that is what you mean. In such proximity to a community as that you can not do without some such thing very well. In our country places we would not think of having any such thing. The nearest approach to it that we have is in the city of Utica, where we have such an inclosure; but that is pretty near the city of Utica.

Ordinarily we have sufficient nurses to give the care and supervision required without the structural help.

The CHAIRMAN. In this particular institution is it not necessary to have something of that kind, by reason of the fact that there are some patients who would wander about and go off from the reservation entirely, if you gave them unlimited range?

Mr. McGARR. I think they would wander off and you would hear more complaints here in the city of Washington than you do now. It would not do at all unless you double up the force, so that they can look after them. Unless you do that you have got to have some such thing.

Mr. BARCHFELD. One of your objections to St. Elizabeth's was that there was no appropriate place for amusement. What is your idea of an amusement hall?

Mr. MCGARR. I think the lot of those patients is terrible enough under the best of circumstances, and that anything that can be done to divert their minds and take them away from these terrible depressing delusions they suffer from is worth almost any sum of money. I believe in the amusement hall. We have them invariably in our New York institutions, and they are serving an absolutely essential function. I was informed by Doctor White that he had an appropriation somewhere in one of the appropriation bills, and I do hope that this committee will take an interest in it.

The CHAIRMAN. It has passed already, for \$75,000.

Mr. MCGARR. That will put an end to that criticism entirely. Doctor White tells me that he had some idea of making it an amusement hall and a hall for religious services. We are rather opposed to that in New York. We find that our Catholic patients do not like the idea of dancing on Saturday night and then going to the same edifice on Sunday to worship. So the answer we make to the people who complain is that we will be very glad to furnish the ground if they will put up the chapel, and the Catholics are doing it now.

The CHAIRMAN. In connection with amusements, have you such things as tenpins and croquet?

Mr. MCGARR. Yes. Those things are most excellent. We have everything of that kind. We have a baseball ground and have developed some very good players. We have running races and field days, with prizes. Sometimes the prizes are given by private persons and sometimes paid for out of our amusement fund. We have an amusement fund, which is granted to each institution on the basis of 2 or 2½ cents per week per capita, and that makes up a large sum.

The CHAIRMAN. Do you give variety shows and entertainments frequently?

Mr. MCGARR. Yes, and the strolling players help us out a great deal. The vaudeville artists are always on the lookout for these engagements in our towns, and they come for a nominal sum. They enjoy coming to the institution apparently. We have lectures, and we have everything that we think can contribute to the welfare of the patients. Each superintendent has the money for it, and he goes out and gathers them in.

The CHAIRMAN. How much money do they appropriate for that purpose in one of the large institutions like Ward's Island?

Mr. MCGARR. It would be the same thing—2½ cents per capita.

The CHAIRMAN. 2½ cents a week?

Mr. MCGARR. 2½ cents per week per capita.

Mr. SMYSER. Do they play seven up?

Mr. MCGARR. Well, we have some excellent bridge whist players amongst the patients in our State.

Mr. BARCHFELD. Do you think a gymnasium would be an appropriate annex to any asylum?

Mr. MCGARR. A gymnasium would have to be very carefully safeguarded. They have with us a little club swinging and that sort of thing for convalescents.

Mr. BARCHFELD. You stated that complaints come from the pa-

tients to you, as secretary of the New York State Lunacy Commission?

Mr. MCGARR. Yes, sir.

Mr. BARCHFELD. You certainly have a great many complaints from the friends of the patients, do you not?

Mr. MCGARR. Yes, sir; a great many of them.

Mr. BARCHFELD. So that is universal?

Mr. MCGARR. Yes, sir.

Mr. BARCHFELD. Not only in New York City and the District of Columbia, but throughout the United States and throughout the world?

Mr. MCGARR. Yes, sir. I want to say one thing in qualification of that, and that is that the complaints in our State are lessening. At the time we started in they were exceedingly frequent; but now, while we get them, we do not get them in any such numbers as we did formerly. I think there is a very largely increased confidence in the institutions in New York State.

Mr. HAY. Do you attribute that to the fact that you have this lunacy commission?

Mr. MCGARR. I think, to some extent, the establishment of the lunacy commission has certainly had an effect. The people at large know about it, and know that if there are any complaints on the part of their relatives who are in the asylums they will be quickly looked after, and quickly inquired into.

The CHAIRMAN. What do you do when you get a complaint of this kind? Do you communicate first with the superintendent, or send someone of your employees to investigate?

Mr. MCGARR. You mean a complaint on the part of a patient?

The CHAIRMAN. Yes.

Mr. MCGARR. If it is a coherent, sensible statement, with some show of probability as to truth, I send copies of it to the commissioners, if they are absent from town, or I bring it before them immediately, if they are in town, and send a copy of the case to the medical inspector, who is constantly traveling. He goes at once to this place and looks after it. The private institutions of course are the ones to which he devotes especial time. You know that the private institutions are always more or less under the ban.

There is a very general feeling on the part of the public that they are incarcerating people for gain. We get a number of complaints from those institutions from people who say they are being locked up under a conspiracy and their property is being taken away from them. All those things are looked into very carefully. If he finds that it is a matter that the lunacy commission should personally investigate, he makes the recommendation to them and sends his own findings as far as he has gone.

The CHAIRMAN. Do you have the supervision of the so-called sanitariums?

Mr. MCGARR. No, sir; but under a law passed a year ago we may enter any suspected sanitorium where we believe a person is deprived of his liberty. If he is unlawfully deprived of his liberty we have the privilege, under that law, of walking right in.

The CHAIRMAN. What does your board cost the State of New York, including the expenses of these medical inspectors you speak of?

Mr. McGARR. Including our office force and everything of that sort, it amounts to about \$65,000 a year. We have quite a large office force, as you see we not only have to do our inspection work, but we have to inspect all of these requisitions. We have an auditor at \$4,000 a year and an assistant at \$3,200 a year, etc. This brings the amount up very largely. Before we had that duty added our inspection work, salaries, and everything else only amounted to \$30,000 a year.

The CHAIRMAN. Do you think that it would be advantageous for the District of Columbia to have a lunacy board, when it only has one institution?

Mr. McGARR. I would rather think it would be better for the Secretary of the Interior to appoint a personal representative of his own.

The CHAIRMAN. He would inspect St. Elizabeth's at any time, without any warning?

Mr. McGARR. Yes; I should think that would be better than to have a lunacy commission. You do not require a lunacy commission, unless you build, as Doctor Hutchinson suggested, two or three institutions.

Mr. BARCHFELD. How about the system of keeping records at St. Elizabeth's? What do you think of that?

Mr. McGARR. I think they are capital. I think there is nothing further in the way of suggestion in regard to them.

Mr. BARCHFELD. In your experience in the treatment of the insane, have you ever heard of an attendant killing a patient?

Mr. McGARR. I think once only.

Mr. BARCHFELD. You have heard, once or twice, of patients killing attendants?

Mr. McGARR. Yes; there was a case here within three weeks, where a patient killed an attendant at Trenton, I think.

Mr. BARCHFELD. The newspapers of New York are about as liberal to superintendents of hospitals, particularly insane hospitals, as they are in the capital of the nation, are they not?

Mr. McGARR. There are papers and papers. In New York the superintendent of the Manhattan Hospital is on the top of a volcano almost all the time.

Mr. BARCHFELD. I would not have Doctor White's job for six times his salary.

Mr. McGARR. Doctor Evans and I were discussing that very thing the other day.

The CHAIRMAN. There was a good deal of difficulty at one time when Carlos MacDonald was superintendent. Was he not accused of some dreadful thing by the New York newspapers?

Mr. McGARR. Yes; Carlos MacDonald was superintendent of the criminal asylum, and there were all sorts of things charged against him. There is hardly a superintendent who escapes. I do not know of any who have.

The CHAIRMAN. Sometimes they even criticise the board of lunacy, do they not?

Mr. McGARR. I think I have heard murmurs of dissatisfaction.

#### TESTIMONY OF DR. BRITTON D. EVANS.

BRITTON D. EVANS, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you reside?

Doctor EVANS. At Morris Plains, N. J.

The CHAIRMAN. Are you the superintendent of the institution there?

Doctor EVANS. No, sir; I am medical director. That institution is under what is known as the dual management.

The CHAIRMAN. That is the State hospital for the insane?

Doctor EVANS. It is a State hospital; yes, sir. But, "for the insane" is not a part of the title. It is for the insane and for habitual drunkards.

The CHAIRMAN. They are sometimes insane.

Doctor EVANS. Yes; under our statute the court of chancery may commit habitual drunkards to the institution, and it is a very good and beneficent law.

The CHAIRMAN. How long have you occupied that position?

Doctor EVANS. Since the first day of June, 1892.

The CHAIRMAN. Are you appointed by the governor of the State?

Doctor EVANS. No, sir; I am elected by a board of managers which is appointed by the governor of the State, and their appointment is ratified and approved by the senate of the State.

The CHAIRMAN. Is this board of managers for this particular institution?

Doctor EVANS. For the particular institution. At one time we had one board appointed by the governor and approved by the senate, which had control of both of the State institutions. We have now a separate board for each institution. The boards are appointed by the governor and the appointments approved by the senate. They consist of eight members, no four of which shall be of the same party. In other words, the effort on the part of the State is to eliminate politics in the management of the public charitable institutions of the State.

The CHAIRMAN. This is an honorary board?

Doctor EVANS. It is an honorary board, without pay. It has a secretary and treasurer who receive pay, but the members of the board receive only their actual expenses.

The CHAIRMAN. Do they visit the institution at stated intervals?

Doctor EVANS. They hold regular meetings monthly. Three of them are called quarterly meetings, and one is an annual meeting. The other meetings are called monthly meetings. Under a provision in the by-laws, which by-laws are approved by the governor, it is provided that a member of the board shall visit the institution weekly. The president of the board selects, at a regular meeting, certain members, after consulting with them as to their convenience, to go to the institution each week.

The CHAIRMAN. Besides this board of managers for your institution, is there a lunacy commission?

Doctor EVANS. Yes, sir; there is a commission in the State which has charge of the insane of the State and has visitorial and inquisitorial authority in all institutions for the insane, the two State institutions, the county institutions, and the private institutions of the State. This board has control, in a way, of the buildings which are erected. No new buildings can be erected in any of the institutions without the approval of that board.

The CHAIRMAN. You have visited St. Elizabeth's, have you not?

Doctor EVANS. I have visited there a number of times. I visited St. Elizabeth's in 1893, during Doctor Godding's administration. I visited it in 1903, when Doctor Richardson was in charge, and I have been there on this visit.

The CHAIRMAN. You were there yesterday?

Doctor EVANS. Yes, sir.

The CHAIRMAN. From your recent visit, which was made in special connection with giving this testimony, what do you think of the institution?

Doctor EVANS. I do not think any man, it matters not how well he is posted in institutional matters, is in a position to give an answer to a question like that satisfactorily to himself, or that would be of the highest value to an inquiring body upon so short a trip; but, so far as I was able to judge, I look upon the progress made in St. Elizabeth's as very marked indeed. I look upon it to-day as bidding fair to be one of the foremost institutions in the world in the care and treatment of the insane.

I agree heartily with Doctor Hutchinson that it is unweildly, and it is too large. I do not believe any institution for the insane should have more than 1,000 patients in it. I have about 1,800 inmates, which is 800 too many. I believe that the Government of the United States should have a large number of institutions, or a number at least, that would care for its insane; and that there should not be more than 1,000 or 1,200 in each. It guarantees more economical distribution of supplies. It gives the chief officer or superintendent a better grasp of his work. It puts him in a position to answer all inquiries with more definiteness. It puts him in closer touch with the individual wants of the institution. Instead of being forced by its size and unwieldiness to delegate all the detail work to his assistants, he can look after it himself.

The CHAIRMAN. In other words, you think it is unfortunate for the Government of the United States, when its soldiers go insane over in the Philippines, to have to send them over to the District of Columbia to get proper care?

Doctor EVANS. I think the Government ought to have more institutions. This institution, for one of its size, is a remarkably good one. The improvements which have been installed there since I last saw it convinced me that they are men who have carefully thought out the wants of the situation, and have used their influence all along upon proper lines to give to that hospital just what it ought to have, and to make it a great, good, and useful institution.

Mr. HAY. Do you think there ought to be an institution here for insane criminals?

Doctor EVANS. I verily do. I would advise that it should be built in another place—not in proximity to the present institution. In fact, I would not want it under the same management. I think these people whose lives have been untainted by crime should not have the stigma or taint of criminality put upon them, and should not be forced to come in contact, or to be housed in the same institution with people who have lived lives of crime, who were born in crime, who are natural criminals, and who are convicts. In our State our classification is peculiar. We distinguish between our convict insane and our criminal insane. Our convict insane are those people who have been convicted of crime, and after conviction are discovered or found to be of unsound mind and unfit to serve out their sentence.

The CHAIRMAN. What do you call the man who has been indicted, and then the trial judge has directed an inquiry to be made into his sanity?

Doctor EVANS. He is a criminal insane and he is remanded to court for trial upon his recovery.

The CHAIRMAN. What do you think of the separation of other classes of patients over there?

Doctor EVANS. The general scheme of classification, it seems to me, is as good as is practicable and as could be well devised under the existing circumstances and conditions. The putting of epileptics off to themselves is a very difficult matter to do where you have an institution like that, because there are different grades of epileptic insane.

Mr. HAY. Do you think there ought to be a separate institution for epileptics?

Doctor EVANS. I verily do, and they ought to be graded, because there are two important principles in caring for the insane that can not be dispensed with. First of all is the securing of humane and intelligent nurses to look after them. That is the very foundation of good management in any institution for the insane. It gives more comfort to the superintendent and to the official board of managers upon which the responsibility rests than any other one item you can think of in the matter of caring for insane people, and it is one of the most difficult for us all. It is becoming more difficult every day.

Ten years ago I had more than 1,400 applicants on the waiting list for the positions of nurse or attendant. To-day I have not any, and I have not more than 80 per cent of my corps of nurses filled. I can not get them in spite of my best efforts to get the most reliable people. Every once in a while some inveterate scamp in the shape of a man or a woman gets into the corps and does some disreputable thing. I ask them all manner of questions, ask them for references, and write for testimonials. I ask them nothing about their politics or their religion. I employ them from Maine to California. All I want to know is that they are willing to do the work conscientiously, that they exhibit a sufficient amount of intelligence to fill the position, and are willing to go through with an ordeal such as they will be subject to and render conscientious service with clean hands and kind hearts.

The CHAIRMAN. What do you pay them?

Doctor EVANS. I pay them all the board of managers will allow me, and sometimes more.

The CHAIRMAN. Take a woman nurse, for instance?

Doctor EVANS. I start the woman nurses at \$18 a month, with board, room, and washing, and I give them as high as \$30.

The CHAIRMAN. Do you give the greenhorn, who comes to you without any training as a nurse, \$18 a month to start with?

Doctor EVANS. Eighteen dollars a month; and give them their instruction in the training school, and their board, room, and washing, and I say kind things to them and jolly them along; and if they are worth anything I almost beg them to stay. That is a matter of fact. It may be amusing to you gentlemen, but it is a serious problem to me.

The CHAIRMAN. What do the male attendants get?

Doctor EVANS. I start them at \$22 a month and run them up as high as \$35; but the \$35 group is a small one.

The CHAIRMAN. Do the male attendants have to study at the training school?

Doctor EVANS. No one is exempt except the musicians, and they are such nervous cranks that it is hard to get them to stay anyhow, with all the encouragement you give them, so I let them off from the training school. We keep a brass band and an orchestra for amusement, and they give band concerts in summer and orchestra work in the winter.

The CHAIRMAN. Do the men who play in the band have to do other work?

Doctor EVANS. Yes.

The CHAIRMAN. They are attendants?

Doctor EVANS. Yes; sort of attendants.

The CHAIRMAN. The same as the waiters on the steamboats?

Doctor EVANS. Chambermaids on a lumber barge.

The CHAIRMAN. Tell us something about the amusements you give your people.

Doctor EVANS. We have about 900 acres, and our outdoor amusements consist of croquet and tennis. We have very fine tennis courts. We have a baseball grounds, and a regular grand stand, with all the facilities for playing high-class ball. We have a 9-hole golf course. Our indoor amusements consist, like it does at other institutions, of checkers, chess, cards, card parties, and bowling alleys. We have fine bowling alleys.

The CHAIRMAN. Do not the people who bowl there sometimes sling one of the arbor vitæ balls at an attendant, or something of that sort?

Doctor EVANS. No. It is a part of our duty to properly select the people who go there. We do not send people promiscuously to an amusement of that kind. If persons who seem to be capable of appreciating an amusement of that sort violate the regulations and disregard the comfort of other people we immediately tell them that they have sacrificed their right to enjoy the amusement for the time being. We have very little trouble with them.

The CHAIRMAN. What about restraint? Do you use the camisole or strait-jacket, and things of that kind?

Doctor EVANS. I do. I know some very good people who have done away with them. I do not believe in either extreme. There are a goodly percentage of insane persons who must be restrained. There are several ways of restraining them. For four years and a half I was connected with an institution where the superintendent did not want anything in the form of mechanical restraint used. I saw only one camisole there during the four years and a half.

The CHAIRMAN. Where was that?

Doctor EVANS. It was the Maryland Hospital for the Insane at Catonsville, Md. What was the consequence? I prescribed a medical restraint. I gave them strong hypnotics and narcotics. I abused their appetites. I am sure that I did no good to their health; but I played to that sentimental side of the matter which pleased the public and seemed to catch the public eye, by not using any mechanical restraint at all.

I was second in charge, but I was loyal in carrying out the directions of my superior officer, which I would do again if I were in the



same position. But when I took charge of the work at Morris Plains and directed it as I wanted it done, I employed mechanical restraint. I do not have it put on without my consent and without a written report of its being put on, when it was put on, and the cause of it. The restraint amounts to about one-third, or one-half of 1 per cent, taking the year through; about that percentage is subjected to the camisole. I think it is more humane than any other form. To avoid the use of the so-called mechanical restraint we would have to have two or three men hold a violent patient.

The patient is liable to get hurt in the struggle, if he is a strong man and you have one or two weak attendants or nurses holding him, and he is liable to get bruised up; to get his leg or arm broken; and you very readily know, especially since you have been through with this investigation, what that means. The friends come and find out that the patient has, in some way, sustained an injury, and they seek to adjust the matter by going to the representatives of the press and to everybody that will pay attention to them so that they may, in turn, damage the institution and cause the public to lose confidence in it. They cause a great deal of sorrow and uneasiness to the relatives and friends of the patients in the institution, thinking that they are going to get redress for a wrong that has been done to them.

So that, to avoid that sort of thing and to protect the best interest of the patients, the most humane thing is, under proper advice and instruction, to put on and properly adjust a camisole, which simply prevents the patient from doing himself bodily harm and from doing those around him bodily harm. As a rule he will quiet down in one-half the time it takes otherwise. His health is not injured by drugs, and he is not subjected to the danger of being bruised in the struggle with the attendants who are trying to restrain him, for the purpose of avoiding the use of the camisole. After a long and careful consideration of the matter that is my conclusion.

The CHAIRMAN. Do you have the hydro-therapeutic treatment?

Doctor EVANS. Yes; and I have just secured from the legislature an appropriation to put in more along the hydro-therapeutic line and the electro-therapeutic line.

The CHAIRMAN. Did you examine those installations at St. Elizabeth's?

Doctor EVANS. I did. They were put in by Clow & Company, of Chicago, which is a very good firm, and they are well selected. I can see no reason why the medical staff of the institution will not be able to do much good with the plant they have there.

The CHAIRMAN. Tell us about the dual system. Do you believe in that, or would you prefer to be superintendent and have all the responsibility?

Doctor EVANS. In the first place a hospital is a medical institution, and I believe that it should be presided over and controlled by a medical authority, by one properly trained and capable. He should have a medical mind and medical training, for the work is medical in its essential characteristics. Since nobody ever thinks of having two governors of a State, or two mayors of a city, if they can avoid it and there is no recount, or two commanders of a battleship, or two generals controlling an army at the same time, I can not see the logic of trying to run a hospital for the insane, a purely medical institution, with two heads.

But in so far as I am personally concerned, our institution is a dual institution and runs along smoothly. I employ all the nurses and discharge them, and under certain very mild restrictions by the board I fix their wages. I make out the diet schedule and submit it to the board of managers, and the business head has nothing to do with it.

The CHAIRMAN. And the board of managers accepts it immediately?

Doctor EVANS. If there is anything in question they discuss it with me, and then they adopt it and send it back and have it printed, and have it hung up in every dining hall and all the cooking departments. If a patient is sick, I or my assistant prescribes for that patient, and that prescription is just as mandatory upon the business department as are my directions to my foreman.

But yet, under the dual arrangement, there is danger of jealousy. If you have got two practical men of business in the same establishment each man is jealous of the other, and you are all the time having friction, or you are all the time on the alert to avoid it, making official life a very uncomfortable one for each so-called head. In addition, I do not think it is an economical administration. I think that you, who have devoted all of this time to this question, will understand one of the important reasons why I say it is not an economical administration. Take the case of supplies. In the issue of supplies I, as the medical head of the institution, might see some place where there was a great waste just before it got over into the medical department.

If it was after it got over that line I can order an investigation and inquire into and correct it. But suppose it is just over the line, in the business department, and I call his attention to it. He perhaps says very little except to intimate that he is capable of taking care of his own department. What is the consequence? The head of the medical department says that he will not subject himself to any rebuff from the business management. Then the business head finds that medical department supplies are issued, which are not properly applied, and that there is a leakage somewhere. He starts out on his line and he goes over there, but he says: "I gave him a call down about two months ago when he came to straighten out something on my side, and if I go over there I will get it in the neck myself."

So the economical interest of the institution suffers for the sake of harmony between the two heads, for which there is no real demand. When there is something in an organization, and you are at the head of it, you can stop it. You can go down the line and analyze everything and find every leakage, and every economic possibility, and every mistake, either on the side of economy or against economy. Then you are in a position to be held positively responsible for it.

There is another objection in the numerous communications of an official character, printed forms and documents and red tape going from one to the other, the keeping of books on each side, the seeing that every person has properly signed certain requisitions or requests, and they come in proper form and were issued in proper form. The cost and expense of maintenance is really double, so that I could not subscribe to it or advise it. I do say, however, that while it is expensive with us we run along without friction, and the people in the State at large like it, I suppose.

The CHAIRMAN. Is that the condition that exists in all the institutions?

Doctor EVANS. The two State institutions?

The CHAIRMAN. Where is the other one?

Doctor EVANS. At Trenton. You were speaking of attendants being hurt by patients. An attendant was killed there about two weeks ago. The patient took the leg out of a table and struck the attendant on the head and knocked him down, and before he could get up he struck him in the ribs and broke his ribs. He never regained consciousness, and died.

The CHAIRMAN. Doctor, did you examine the dietary over there at St. Elizabeth's at all?

Doctor EVANS. No; I did not go through the dietary. I discussed the dietary. I did not go through it thoroughly, and I am hardly in a position to testify about it. I did eat some oleomargarine there. I didn't know it until they told me about it. I thought it was very good Elgin butter. [Laughter.]

The CHAIRMAN. Which do you use in your institution?

Doctor EVANS. I use butter, and the best butter we can get. I don't know whether there is any statutory provision against using oleomargarine, but I know that a member of my board is a great dairyman, and during the fight on the oleomargarine bill was down here two or three times before the committee, and he would go into convulsions if I told him anything about oleomargarine. I think he wanted it all stained pink. [Laughter.] I knew it would not be worth while to mention it.

The CHAIRMAN. Doctor, about the cost. What is your per capita cost?

Doctor EVANS. Probably more than any other State institution in the United States.

The CHAIRMAN. How much is it?

Doctor EVANS. It varies from \$4.50 to \$4.65 per week.

The CHAIRMAN. How do you get your appropriation—so much per year or do you make your requisitions upon the appropriation committee of your legislature?

Doctor EVANS. I will explain that to you. Our annual reports show a certain per capita, and I do not think the financial or business officer of the institution would make that report, because he probably would not put into the cost per capita all that I do; but the way it is done is this: We only receive \$4 a week for the maintenance of our indigent patients; but about 11 per cent of our patients are private patients and pay us from \$5 to \$50 a week. That goes into our treasury along with our revenue or regular appropriations for the maintenance of our indigent patients and enables us to raise the grade of maintenance and the entire standard of the institution. As far as I am personally concerned, the better we can give them the better I am satisfied.

The public wants them properly cared for, but they are very ready to complain and say ugly things about us as soon as there is evidence that they are not being cared for with good food and good clothing. The better we can give them, the better we are pleased. Everybody who knows anything about caring for insane people knows that if you treat them like hogs you can keep them on just

about the same expense for which you can keep a hog; but if you look upon them as human beings and sick persons and people who need the best medical attention you can give them, if you think of them as the sons and daughters of your neighbors and the citizens of the land—and many of them are most prominent people—if you think of them as people who are not capable of speaking for themselves and caring for themselves, and need kind attention, good food, good medical attention, and comfortable clothes, clothing such as will not reflect upon them and make them look like prison birds, but like veritable citizens of the United States who happen to be unfortunate and afflicted with disease, it is going to cost something, and if it is worth doing it is worth doing well. We have an opportunity to do it pretty well, and we do it.

The CHAIRMAN. In the matter of clothing, how do you think, from your observation of the patients over at St. Elizabeth's yesterday, that they compare with institutions such as yours?

Doctor EVANS. I do not think they are clothed quite as well as ours are. I think they are clothed better than the patients are in the State of New York. [Laughter.] Has McGarr gone?

The CHAIRMAN. Yes; I am from New York, though.

Doctor EVANS. Well, you have been up against it over there. Odell was pretty hard on you.

The CHAIRMAN. I have been in your institution and addressed your patients. I have told them stories on the 4th of July.

Doctor EVANS. I am sure they appreciated it. They never forget good stories. Some of them have a much better memory than I have. You asked me about entertainments. We have theatrical troupes come from New York, and we pay them right out of the treasury. We consider that a part of the treatment. We have a new amusement hall now, that has been built under my administration, that will entertain, I think, about 850 people.

The CHAIRMAN. How about your dining rooms? How do you arrange those? Do you have a general dining room?

Doctor EVANS. We have both. Our new building was built for chronic patients—those who could work outside, and whose mental diseases are such that we look upon them as incurable, so-called chronic incurable insane; that class of insane persons who do the work in institutions. We put them up there, and we have a congregate dining room where we feed about 600 persons. On the same floor is our kitchen, and we have cars with rubber wheels that take on the food and bring it in right hot from the range.

The CHAIRMAN. Did you go into the general dining room over at St. Elizabeth's?

Doctor EVANS. No; I was not able to do so. To go over that institution, and do it any way right, would take five or six days. It would be a matter of almost a farce to say I could do it in a day. I did not do very much of it, to be frank with you.

The CHAIRMAN. You said the number at your institution was 1,800?

Doctor EVANS. Between 1,700 and 1,800.

The CHAIRMAN. Is your institution overcrowded? Have you ample accommodations for the patients you have?

Doctor EVANS. We have now, but we will not have, and I feel fearful that they will want to enlarge the institution because of the fact

that it is cheaper, they think, and that is what nearly everybody argues, you know—to take the same corps of officers and the same plant already installed, as to steam and light and your corps of officers, and add new buildings and increase your number.

The CHAIRMAN. But if they take your advice, you would have a separate institution in the State of New Jersey?

Doctor EVANS. I would. I never would have had constructed the new building which has been built since I have been there which contains 600 people.

The CHAIRMAN. How long did you say you had been there?

Doctor EVANS. Since 1892. I am in my fifteenth year now.

The CHAIRMAN. Did you know Doctor White before you came here?

Doctor EVANS. I had met Doctor White. I only met him once though. I have known of Doctor White for some time. Doctor White has been a contributor to medical literature, and especially along the line of his specialty, for some time.

The CHAIRMAN. What is his reputation and standing in the profession?

Doctor EVANS. Doctor White's reputation is very good indeed. He stands well.

Mr. HAY. Doctor, how do you buy your supplies?

Doctor EVANS. A large amount of our supplies are bought in the open market, but the coal and flour and our drugs and many of the other supplies are bought by competition, not by advertising, but by notifying a number of reliable firms and letting them submit their bids.

Mr. HAY. How do you buy your clothes and shoes?

Doctor EVANS. Those are bought in open market where we can do the best, because we do not have to conform so much to the latest styles as we would if we were buying for officers or for some other assemblage of people.

The CHAIRMAN. Have you a farm connected with the institution?

Doctor EVANS. About 900 acres.

The CHAIRMAN. Right there on the same spot?

Doctor EVANS. Yes, sir.

The CHAIRMAN. Do many of your patients work outdoors on the farm?

Doctor EVANS. Yes. I have a table here that gives that. Of the 1,800 about 255 work out, and in the various departments about 401. Somewhere about 45 per cent of them are employed. I think a much larger number should be employed, but it is a very difficult matter to employ patients. You see, I draw largely from cities as well as from the rural districts. In the northern part of New Jersey—you know how it is thickly populated as to cities—I draw from Newark, from Jersey City, from the Oranges, from Paterson, and from Elizabeth. It is a hard matter to have a man who is brought up in the shops or a professional man and put him out on a farm and get good work out of him.

Occasionally we do that because they like the open air and naturally take to it, but it is hardly fair to try to force them to do it; and our industrial departments established for the employment of patients are not what they ought to be. I have advised an enlargement along that line, an improvement, and I think it will come after awhile.

The CHAIRMAN. Do you compel these patients to work whether they want to or not?

Doctor EVANS. No; we try to induce them to work. It is pretty hard to get an insane person to work if he makes up his mind that he will not. Some men are able to put the patients to work and induce them to show their real worth and their suitability or adaptability for work.

If you send patients to the laundry to work, and there are people looking after them who will give them little afternoon teas or have lemonade and cake for them or take them out for a walk, or give them a little party some evening when the work is slack and jolly them along, or if somebody who enjoys reading will have little reading parties for them and humor them in that way, it is a great benefit. It is the same way with the men. If a man comes in when the circus comes around and asks whether he can't send his group of men, who work very well, with somebody to take charge of them to let them see the circus, they become attached to those men; and sending them out once means that they will want to go again, and after a while, as they get into the more advanced state of chronic insanity, it becomes a part of their life, and they just go out as naturally as a duck goes into a mud puddle, and they seem to enjoy it as much.

In fact, they feel aggrieved if you do not let them go, but it is a matter of training and having reliable men and women to look after them. When you get good nurses and attendants you have done a great deal to help your work along in its various aspects.

The CHAIRMAN. What is the ratio of the attendants and nurses to the patients in your institution?

Doctor EVANS. We have about 1 to 9 when our corps is full, but we have not that many. We have about 1 to 11 now. We can not get them.

The CHAIRMAN. What are the hours of work?

Doctor EVANS. About fifteen hours a day.

The CHAIRMAN. How often do they get off—on vacations or days off?

Doctor EVANS. We give them two evenings and one afternoon each week. We give them every second Sunday and a whole day off every month.

The CHAIRMAN. But except for those they are practically on duty all the time?

Doctor EVANS. They are practically on duty all the time and are locked in at night.

The CHAIRMAN. They are like a domestic servant in the house?

Doctor EVANS. Yes; it is worse, because they are in more disagreeable scenes.

The CHAIRMAN. But I mean as far as the continuance of the duty is concerned.

Doctor EVANS. Yes.

The CHAIRMAN. Have your nurses a separate home?

Doctor EVANS. Yes; I think we have one of the best in this country.

The CHAIRMAN. Did you see this one over here?

Doctor EVANS. Yes; I did not go in. From the outside, yours is a much more expensive one. I have been in a number of nurses' homes in the various States, and I have one that is second to none I

have had the pleasure of going through, but I did not go through this one.

The CHAIRMAN. Have you also a separate home for the male attendants?

Doctor EVANS. No. I asked for an appropriation, but with the usual results. I got a half, and I gave it to the girls. [Laughter.] I have hopes of getting the other later on.

The CHAIRMAN. Doctor, if you were asked to make some improvements on St. Elizabeth's, from what you saw there, is there anything that you would suggest in particular?

Doctor EVANS. I do not know anything I should do. I would take the epileptics out on the farm. That is where they belong. I would build out on the farm for the working classes and take them entirely away from those who are chronic and incurable, and who are capable of doing work. I would put them in close relation to the work. I would leave the present plant for the more acute patients and those most susceptible to treatment or those who needed to be in closer touch with the medical staff.

The CHAIRMAN. How do you care for your epileptics? Have you a separate building?

Doctor EVANS. We have a State epileptic village, as they have in New York, and we send there the milder forms of epileptics, even when they exhibit at times or periodically mental irregularities; but I have had to work very hard to get the epileptic village started, and I wanted it to get solidly on its feet before I sent any troublesome patients there, because I feared sending them there would interfere with the successful organization of the work.

The CHAIRMAN. Have you the insane epileptics as well as the others?

Doctor EVANS. We have no epileptics except those who are insane, and we keep them just as much as we can by themselves.

The CHAIRMAN. You mean you have some insane epileptics in your institution?

Doctor EVANS. Yes; I think we have about 75 or 80.

The CHAIRMAN. But the village you speak of is for epileptics whom you do not consider insane?

Doctor EVANS. Yes; and those who are mildly insane—those who are not dangerous.

The CHAIRMAN. What do you do in New Jersey with your convicted insane and insane criminals?

Doctor EVANS. We keep them in our State institutions. We have no separate institution. We have fought for a separate institution for some time.

The CHAIRMAN. Do you mean in your penal institutions?

Doctor EVANS. No; we keep them in our State institutions for the insane.

The CHAIRMAN. Have you criminal people with you?

Doctor EVANS. Yes, and they have at Trenton. I have made a fight in my annual report for ten years. I go down to the legislature and I do not think I know a member of the legislature who does not agree with me, except when it comes time to make the appropriation. He does not seem to agree with me then, but all the rest of the time we are in perfect harmony.

Mr. HAY. You think, then, there ought to be a separate institution for these insane criminals?

Doctor EVANS. I am most positively of that opinion. I do not think there is room for any serious argument upon the situation at all.

The CHAIRMAN. Why don't you make Governor Murphy help you?

Doctor EVANS. The Governor did pretty well by me, but he did not do that. He wanted signboards down along the Pennsylvania Railroad. He was concentrating his efforts along that line. The Governor did pretty well by me, but he did not give me that appropriation.

Mr. BARCHFELD. Do your attendants do some service outside of waiting upon some patients? Do they do little chores, cleaning up the yards, say?

Doctor EVANS. No; that sort of police duty is assigned by the business head, the so-called warden of the institution, to his help, and they do the policing around the building. I have a group of patients, with an attendant or nurse or two to keep the golf grounds and base ball grounds and the tennis courts in order so that they are in shape for them to use. It keeps them in the open air. They seem to enjoy it, and when our new buildings needed some grading, I had some grading done in that way.

The CHAIRMAN. Do you find the patients take kindly to golf?

Doctor EVANS. Oh, yes; they are very fond of golf. The only trouble about it is that it is too expensive to furnish the patients with clubs and the paraphernalia, you know, and only a limited number of them have friends who are willing to send them plenty of golf balls as fast as they lose and break them.

The CHAIRMAN. They lose balls, I suppose, as fast as sane people do?

Doctor EVANS. They seem to. There does not seem to be much difference in that particular.

Mr. BARCHFELD. How many doctors have you there?

Doctor EVANS. There are seven of us, and a graduate druggist.

Mr. BARCHFELD. And a pathologist?

Doctor EVANS. Yes; we have a pathologist.

Mr. BARCHFELD. Do you hold autopsies?

Doctor EVANS. In every case where we are permitted to do so; but there is no statutory provision enabling us to hold autopsies. Where we have permission from the nearest relative and friends we hold an autopsy upon every body for which permission is given.

Mr. BARCHFELD. It is a material assistance to the physician?

Doctor EVANS. We think so.

Mr. BARCHFELD. Of course; there should be no objection on earth to holding an autopsy in every instance.

Doctor EVANS. But in a great many of the cases there is bitter opposition. We are unable to get permission; but we never allow one to get out of there unautopsied if we get permission. We had a reporter call up there the other day and ask if a certain man had not died. The clerk told him yes. He asked if they held an autopsy. The clerk told him yes. He said "Before or after death?" The clerk told him "Before death, always, in that institution." [Laughter.] The reporters are just as energetic up that way as they are down this way, but maybe not so indulgent. [Laughter.]



The CHAIRMAN. I suppose you have knowledge of such things as complaints by patients that they are maltreated, have you not?

Doctor EVANS. No man has ever been in the work six months who has not known plenty of that. That is certain. You start out, in the first place, with this set of propositions: You have insane people to care for who could not get along and harmonize with other people in the outside world. You have, in a large percentage of them, the hereditary insanity, to start with, and the friends and relatives are peculiar people to deal with.

They make their complaints on the flimsiest basis. They find gross injustice where injustice has not been done. They are not susceptible to reason, as other people are, and there is a large percentage of the near relatives of the patients who are so near inside that it is a wonder how you are able, under the law, to let them go out when they come to make their complaints. [Laughter.] That complicates the situation very much, and anybody who has been in the work knows it. We have letter after letter, complaint after complaint. I have a man who claimed that his wife's wedding ring had been lost, and he came to me for it. He said he would not have lost it for \$1,000,000.

I saw it. It was given to her by him, and he was told we would not be responsible for it. It had probably 75 cents or a dollar's worth of gold in it. He came down to \$5,000, I think, and the last time, I think, to \$2,000; but he went to see the governor. He went to see all the county authorities, all the members of the legislature and of the State senate, and wrote letter after letter about this ring. She told him she threw it away. Finally, he was not satisfied, and he took her home, and she gave him a good, sound thrashing; and he brought her back the next day with his eyes blacked and his face scratched up, and I was the happiest man in the house. [Laughter.] Yes, sir; that is just as much a part of the trials and tribulations of a hospital man's life as it is to hear the petty complaints of the patients as he goes through the wards.

The CHAIRMAN. Or the criticisms that their constituents make of Congressmen.

Doctor EVANS. That is right; but we can not send them any seeds and bugs and things like that to placate them. [Laughter.] The board nor the legislature will not stand for it.

Mr. BARCHFELD. You get your appropriation in a lump sum, do you?

Doctor EVANS. That I should have explained to you, and it will take only a minute. The law in our State for the management of indigent patients is this: The State appropriates \$2 per capita per week toward the maintenance of what are known as indigent paupers. The county pays the balance, and the statute provides that it shall not be more than \$4 per capita per week for the maintenance; but the county pays in addition to that for the clothing.

It is \$4 per capita per week for the maintenance. There is another class of patients, known as State indigent patients, who are patients declared to be insane by the courts, but for whom a legal settlement can not be determined; and the legal-settlement law is a most peculiar arrangement in New Jersey. Under that law a person has to be ten consecutive years in a county in order to obtain a legal settlement. It is under the old poor law of 1846, and if he goes away to another

county he loses his legal settlement, but he does not gain a legal settlement in the county to which he goes.

He may have residence in a year or two, and have property and vote, and be elected governor of the State and go to Congress, or anywhere, but he has not a legal settlement until he has been there ten years, and he loses it as soon as he goes away. But in order for a county to be responsible for his maintenance he must have a legal settlement, and not having a legal settlement, the State pays for him. He is what is called a State indigent, and the State pays for her convicts.

The CHAIRMAN. It is exactly like the parishes in England, as described in one of Dickens's novels, when the old woman was sent from parish to parish.

Doctor EVANS. Very much the same.

Mr. BARCHFELD. You said your per capita was \$4.65?

Doctor EVANS. Yes; I explained that. The revenue we get from private patients enables us to expend in excess of what we get in the way of appropriations to maintain them. Our private apartments are already constructed, and facilities are prepared for them. It is like going to a hotel. We charge \$50, and it does not cost us any more to actually maintain the patient in that apartment than it would to maintain the \$10 or \$15 patients. Consequently the \$35 is velvet, as they call it sometimes. [Laughter.] You see, the religious teaching of every organization is not always the same, and I sometimes get off a parlance that is hardly admissible.

Mr. BARCHFELD. What do the patients get at your institution that the patients at St. Elizabeth's do not get in the way of food for that \$4.65?

Doctor EVANS. I am not able to say as to that.

Mr. BARCHFELD. Do you think your clothes are shaped better than those over here?

Doctor EVANS. I like the styles. We are closer to New York, you know. I do think we do clothe our patients better than any other State institution I know of. The clothing the male patients wear, those who are capable of appreciating it, indigent patients, is just such clothing as I would be willing to wear if it were not that I would go out and meet a lot of people, and everybody would know it would come out of the same pile; but the clothes look all right.

Mr. HAY. How do you feed your patients?

Doctor EVANS. We feed them pretty well, except that when fruits are scarce, and they are in the dietary, they are apt to run to prunes a little more than I like. [Laughter.] The food is good. I think it is much better than in the New York institutions. It is served better, is of a better grade, better quality, and there is more of it; but in all institutions, you know, where they have those fixed dietaries and it says "fruit in season," if you look over the prune bill you will find it a big one. That is a standing joke.

The CHAIRMAN. Is not that sometimes so in even a hostelry where you might go yourself?

Doctor EVANS. Yes; I have found too many prunes.

Mr. SMYSER. Doctor, you were here this morning and heard the narration of this trouble with this patient out there on Saturday night, did you not?

Doctor EVANS. Yes, sir; I heard that, and I listened very carefully, too.

Mr. SMYSER. Do you think that such things occur frequently in other institutions?

Doctor EVANS. Every State institution of that kind will, at irregular periods, have such occurrences. They are unavoidable. If you could recognize the mental and nervous make-up of your patients, so that they were harmless as lambs, they would not attack anybody, and they would not be troublesome, and you would not have all those complications.

If a dangerous man attacks an attendant, the attendant has nothing to do but to try to defend himself and to protect the patient as best he can. If it is a question of life between the patient and the defendant, nobody expects the attendant to sacrifice his life readily and willingly. He might just as well go out and commit suicide. I do not see, from the evidence here, that the attendants could have done any more than they did. They did all they could. There is no evidence that they hammered him or beat him or thumped him. There were no bones broken.

They threw him down and they put a camisole on him, as they had been directed; but that sort of thing happens in every institution. The simple fact that you do not hear of all of them is no proof at all that they do not bob up, almost regularly. It can not be avoided in the care and treatment where you take in all the various classes of insane people. They even happen in private institutions.

Mr. BARCHFELD. It helps out the newspaper wonderfully for a news item.

Doctor EVANS. Well, they enjoy that.

The CHAIRMAN. They happen more often in private institutions than in public institutions, do they not?

Doctor EVANS. I think they do, in proportion to the number of people.

The CHAIRMAN. That is what I mean. I think that is all. We are very much obliged to you indeed, Doctor.

Doctor EVANS. You are heartily welcome.

The committee (at 4.35 o'clock p. m.) adjourned until Wednesday, June 27, 1906, at 10 o'clock a. m.

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HOUSE OF REPRESENTATIVES,  
*June 27, 1906.*

The committee met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace.

Also, Doctor White, Mr. Evans, Doctor Emmons, and others.

**TESTIMONY OF DR. MARY M. WOLFE.**

Dr. MARY M. WOLFE, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor, you are connected with one of the institutions for the care of the insane, are you not?

Doctor WOLFE. I am.

The CHAIRMAN. Give the name of it, please.

Doctor WOLFE. The Norristown State Hospital, Norristown, Pa.

The CHAIRMAN. How large an institution is that?

Doctor WOLFE. The whole hospital has just about 2,500 patients.

The CHAIRMAN. That is about the size of St. Elizabeth's.

Doctor WOLFE. I have charge simply of the women's department, and we have about 1,260 patients.

The CHAIRMAN. They are just about evenly divided, the men and women?

Doctor WOLFE. The women are a few more.

The CHAIRMAN. How long have you been the superintendent of that department?

Doctor WOLFE. I have had charge of that department since February 1, 1901, a little over five years.

The CHAIRMAN. Where had you been before, Doctor?

Doctor WOLFE. I was an assistant there for about a year and a half before I was promoted to my present position.

The CHAIRMAN. Had you been connected with other institutions before?

Doctor WOLFE. I had not, up to that time.

The CHAIRMAN. Is the government of that institution divided? I mean, do you have absolute control of the women's part of the institution?

Doctor WOLFE. I have.

The CHAIRMAN. In other words, you are the head officer?

Doctor WOLFE. The head officer of the women's department.

The CHAIRMAN. Then there is a physician who is at the head of the male department, I suppose?

Doctor WOLFE. Yes.

The CHAIRMAN. Who is he?

Doctor WOLFE. At the present time we have no person in that position. Dr. D. D. Richardson did hold that position, and he died last March. Ever since then there has been no one there in that place.

The CHAIRMAN. In regard to the business administration of the hospital—how is that cared for?

Doctor WOLFE. We have a steward who attends to all the financial matters of the institution. None of the money of the institution goes through the hands of the physicians at all. We make requisition on the steward for the various things we need and he furnishes those. For instance, even stamps. I put in an order for so many hundred stamps, and he fills that order.

The CHAIRMAN. The steward, then, is not in any sense under you or the head of the male department, but he is the head of his own department without anyone above him?

Doctor WOLFE. We have the three heads, which are supposed to be correlative.

The CHAIRMAN. In that connection, is there ever any clashing between you and the—however, I will not ask you that.

Doctor WOLFE. That is all right.

The CHAIRMAN. I will ask a general question. Do you think that method of governing a large institution is entirely satisfactory?

Doctor WOLFE. Well, we get along fairly well up there at Norristown, but I can see where there would be a good deal of danger from

it. We are fortunate enough to have a very broad-minded man as steward there. How long we may be able to keep him I don't know, but if we got a man of different caliber there as steward I know he could give us a good deal of trouble and interfere a good deal with the medical work of the institution. Of course, you can see that being a three-headed institution and not caring to squabble any more than you can help, you would probably put up with things under those circumstances, as long as they were not absolutely vital to the running of the institution, that otherwise would be changed and would be run in a very different shape.

The CHAIRMAN. Do you think it is an improvement from an economical standpoint to run with one head?

Doctor WOLFE. Well, I should think so. At the present time our board are having a little trouble in filling Doctor Richardson's place. The salaries of the two head officers are each \$2,500. If one man was at the head of that institution, or one person, you see, two salaries would make the salary of the superintendent \$5,000. They could get a very much better man for \$5,000 than they could get for \$2,500. They do not care to raise the salary, and they are not getting, or have not been able to so far get a man who suits them, and whom they feel could do justice to the institution at that price, whereas if they had a salary of \$5,000 I do not believe they would have any trouble.

The CHAIRMAN. I gather from that, concretely, in connection with this particular institution, you can get along, but abstractly you think the single superintendent of an institution is better?

Doctor WOLFE. I would not want to say that we never have any clashing at all, because when you have three heads that way it is almost impossible to get along without your little family friction, but we do not have very much of it.

The CHAIRMAN. What I am getting at is this: I gather from what you say that you think an institution of that kind can be better run with a single head.

Doctor WOLFE. I do.

Mr. SMYSER. A head who is responsible for the whole management?

Doctor WOLFE. For the whole management. And I think that head should be a medical head and not a layman.

The CHAIRMAN. But the medical head should also have charge of the lay administration of the institution?

Doctor WOLFE. Yes; I would think he should try not to allow that to usurp all of his time, but I think that certainly he should have charge of the expenditure of the institution, because ultimately it is the man who holds the purse strings who has the power. For instance, I make recommendations on various things. If the steward, in bringing up his side of the matter to the trustees of the institution, should say that he did not think the finances of the institution would stand it, the trustees might waive that, although they would think it was a very good idea, whereas the superintendent might be willing to cut down on some other part to help along a thing he might consider more important.

The CHAIRMAN. You speak of the board of managers. How large is the board?

Doctor WOLFE. We have a board of thirteen members—a board of trustees.

The CHAIRMAN. How are they appointed?

Doctor WOLFE. Five of those men are appointed by the Governor of Pennsylvania, two of them are elected by the Philadelphia city councils—Philadelphia is in our district—and the remaining six are appointed by the county commissioners of the various counties in our district. You see, we have seven counties, Philadelphia and six others.

The CHAIRMAN. I see.

Doctor WOLFE. So that they compose the board.

The CHAIRMAN. What are their duties? I mean how many meetings do they have? Will you tell that, please?

Doctor WOLFE. They have a regular monthly meeting of the board, and in the interim between those meetings they have an executive committee composed of three members of the board. The members of the board serve on that committee alphabetically, and between the regular meetings of the board they are the final arbiters of anything that goes on in the institution.

The CHAIRMAN. And the three members of the executive committee change every month?

Doctor WOLFE. Yes, sir.

The CHAIRMAN. They are taken alphabetically, you say?

Doctor WOLFE. Yes, sir.

The CHAIRMAN. How often do they visit the institution?

Doctor WOLFE. The executive committee always meets at least once between the monthly meetings. They have a meeting two weeks before the regular monthly meeting, so that some of the trustees meet at our hospital twice a month. Then whenever anything is needed in addition to that they may come even three or four times a month.

The CHAIRMAN. These meetings you speak of as the monthly meetings and the meetings in the interim between are at stated times, are they not?

Doctor WOLFE. Yes.

The CHAIRMAN. So that the people connected with the institution know when they are going to be there?

Doctor WOLFE. Yes; the monthly meeting of the board of trustees always takes place on the first Friday in the month.

The CHAIRMAN. Is there in the State of Pennsylvania a State lunacy commission?

Doctor WOLFE. There is; but it is not like the lunacy commission in New York State. As I understand, the lunacy commission in New York State has executive power. Our lunacy commission simply has advisory power.

The CHAIRMAN. Do they send inspectors at times unknown to the institution to visit the several institutions?

Doctor WOLFE. Do you mean without our knowledge that they have been there at all, or without knowledge that they are coming?

The CHAIRMAN. Without previous knowledge that they are coming?

Doctor WOLFE. Yes; they visit us quite frequently in that way. Sometimes they may send word they would like a carriage to meet them at the station, but at other times the first intimation we have is when they come to the office door.

The CHAIRMAN. Is that done frequently?

Doctor WOLFE. Probably three or four times a year.

The CHAIRMAN. Do you know how many institutions for the care of the insane there are in the State of Pennsylvania?

Doctor WOLFE. Six. Those are simply State hospitals. Of course

there are county hospitals, too; but those are simply the State hospitals.

The CHAIRMAN. Does the State board visit the county hospitals also? Doctor WOLFE. They have charge of them also.

The CHAIRMAN. Is there in the State of Pennsylvania a separate institution for epileptics?

Doctor WOLFE. There is not at the present time; but they are building one.

The CHAIRMAN. Would that be for insane epileptics?

Doctor WOLFE. I understand it is to be for the epileptics for whom there is some chance of cure or betterment.

The CHAIRMAN. Have you epileptics in your institution?

Doctor WOLFE. We have. I have about 85 epileptics among my women, and I think there are about the same number on the men's side of the house.

The CHAIRMAN. Do you keep them in a separate building?

Doctor WOLFE. Yes; I have three wards where I keep those epileptics. Our hospital is built in sections, something on the order of St. Elizabeth's, except that our buildings are connected by corridors. I have two wards, composing the whole top floor of one section, in which we have epileptics. Then we have another ward of epileptics farther back in the hospital, among the more violent patients, in that way trying to classify them to a certain extent.

The CHAIRMAN. Doctor, did you visit St. Elizabeth's day before yesterday?

Doctor WOLFE. I did. I was there from about noon until the next morning.

The CHAIRMAN. Of course you could not have seen the entire institution, but you went through it as extensively as you could, considering the time that you were there, I suppose?

Doctor WOLFE. I did. I went over a good deal of ground.

The CHAIRMAN. Doctor, from your experience what was your impression of the hospital?

Doctor WOLFE. I thought the hospital was very well run, so far as I could see from a cursory examination of that kind.

The CHAIRMAN. Did you go into the women's wards as well as the men's?

Doctor WOLFE. Yes; a few of them. Of course I spent more time in the women's department, because on Tuesday morning Doctor O'Malley took me into the women's department a second time, and I had a chance to see it again.

The CHAIRMAN. What did you think, as far as you could judge, of the character of the nurses and attendants there?

Doctor WOLFE. They seemed to me to be a very good lot of women, so far as I could judge. Of course, to know just exactly what their abilities were as nurses, I would have to see them and see them a longer time among their patients.

The CHAIRMAN. Naturally.

Doctor WOLFE. But so far as I could tell, they seemed to be doing their work and doing it well. The housekeeping of the hospital seemed to be well kept up. Everything was clean, nice, without odor, and the patients seemed to be well cared for and well looked after in every way so far as I could see.

The CHAIRMAN. What did you think of the buildings themselves, as far as convenience and scientific arrangement are concerned?

Doctor WOLFE. The new buildings, especially, I thought were well planned. The rooms were airy and very commodious. In fact they are larger than the rooms we have at Norristown. Then, the porches at the ends of those buildings certainly are a great benefit to the patients. Having the patients out on those porches day after day must help in the work very much.

Mr. SMYSER. And as to the segregation of the female patients, what have you to say about that?

Doctor WOLFE. You mean the classification in the various buildings?

Mr. SMYSER. Yes.

Doctor WOLFE. So far as I could see on the short examination I made, there was nothing that could be objected to in any way in that.

The CHAIRMAN. You went to the nurses' home, of course, Doctor?

Doctor WOLFE. I did.

The CHAIRMAN. What did you think of that?

Doctor WOLFE. I think it is the prettiest nurses' home and the best appointed nurses' home I have ever seen. We have a nurses' home at Norristown that we think is very nice, but I think in several small points this one goes ahead of it. I do not think they could ask any more comfortable quarters than they have there. You will go into a good many hotels and pay \$4 or \$5 a day and will not get any better accommodations than they have there.

The CHAIRMAN. You speak of having a nurses' home in Norristown. Have you separate building for the male attendants also?

Doctor WOLFE. We have not. The legislature in Pennsylvania did exactly as they did with Doctor Evans. They were kind to the women.

The CHAIRMAN. I see. From your experience you consider it very important, do you not, that attendants, both men and women, should have separate quarters?

Doctor WOLFE. I do. I think after attendants have been with insane patients, with all of the worries, the responsibilities, and the irritations they have to put up with, for from twelve to fourteen hours, the best thing for them is to be entirely away from the patients until they have to come on duty the next morning.

Mr. SMYSER. Far enough away so that when they are off duty they are subjected to none of these annoyances?

Doctor WOLFE. None at all. We try to make our nurses' home just as much of a home for the girls as we can. When they are there we try to give them as much freedom as we can. Of course we can not permit them to be boisterous and do things that are wrong, but as much as we can we let them feel that the building is theirs for their own accommodation and use.

The CHAIRMAN. Doctor, in regard to the hours of the attendants, did you investigate in your talk with Doctor O'Malley in regard to the hours of nurses?

Doctor WOLFE. Yes; I find their hours are virtually the same as ours. Our attendants come on duty at half-past 5 in the morning. One day they go off at 6 o'clock and the next day they go off at 9 o'clock at night. The day they go off at 9 sometime during the day they have an hour to themselves. Then they have a half day every week, and every third Sunday, with two weeks' vacation each year, which we encourage them to take at six months' intervals, giving them



a week every six months, thinking that that rests them and keeps them in better condition than when they take the two weeks together.

The CHAIRMAN. Do you have difficulty in getting your attendants?

Doctor WOLFE. We have not had, as a rule, but for the last six months we have had quite a good deal of trouble. For instance, at the present time we are about six or eight attendants short.

The CHAIRMAN. Is there a civil-service examination of them?

Doctor WOLFE. No; we have no civil service in Pennsylvania at all.

The CHAIRMAN. You have not?

Doctor WOLFE. That is, among the insane.

The CHAIRMAN. That means you practically appoint all the attendants you are going to work in your particular department?

Doctor WOLFE. I appoint all of those attendants. We have applications, and when an attendant makes a request for a position we send an application and she must answer certain questions and come up to certain requirements.

The CHAIRMAN. In other words, you make a physical examination, and examine into her character and find out whether you think she is satisfactory?

Doctor WOLFE. Yes.

Mr. SMYSER. How do you account for the difficulty in obtaining suitable nurses and attendants?

Doctor WOLFE. When it comes spring and summer, we are so close to the seaside and mountain resorts that our girls would rather go away and take some position in a hotel or in some capacity at a sea-shore resort or mountain resort and have a good time for the summer. As a rule they do not have much difficulty in getting positions when they come back in the fall. During the winter time we seldom have any trouble in getting along, but in the summer time we do have. Another class of our women are farmers' daughters, and in the summer time their parents want them to come home and help with the work on the farm. So much as I can, without cutting down the work of the hospital, I rather encourage that to a certain extent, because I think we get better work when the girls come back in the fall.

The CHAIRMAN. Doctor, how does the pay of the female attendants and nurses in your institution compare with this one?

Doctor WOLFE. There is very little difference. The first month that a woman attendant is with us she gets \$14 a month. That is while she is on probation. The next month she gets \$16, and she remains at \$16 until she has passed the first year in our training school. Then the next year she has a dollar added to her wages. We do that as an encouragement to make the girls pay attention to their work. As I said, during her senior year in the training school she has \$17 a month, and after she has graduated from the training school she gets no less than \$18, and has a chance, depending on the position she holds, to run up to \$35 or \$40 a month.

The CHAIRMAN. Now about the amusements at your institution. How do you amuse your patients? Have you a separate amusement hall?

Doctor WOLFE. We have a separate amusement hall, but it is entirely inadequate. We have been trying to get a new one for the past three sessions of the legislature, but so far we have been unable to do that. They have had so many other places for their money that they couldn't do it for us.

The CHAIRMAN. They are like all legislatures, probably. What kind of amusements do you have for the patients?

Doctor WOLFE. During the winter time on Monday night we have an attendants' ball. The attendants get up a dancing school and we permit the best of the patients to attend that. Then on Tuesday or Thursday nights we have some sort of entertainment—either a magic-lantern lecture or vaudeville performance, or something of that sort. Wednesday night we have prayer meeting, and if we have not an entertainment on Tuesday night, of course Thursday night is the entertainment night. Friday night we have a ball, and Saturday night we have nothing.

The CHAIRMAN. Do many of the patients enjoy this prayer meeting? I am asking quite seriously.

Doctor WOLFE. Doctor Richardson and myself disagreed on that matter. He thought they did and I thought they did not.

The CHAIRMAN. Because if they had to go to prayer meeting under the same circumstances that some of us were forced to go, I do not believe they do.

Doctor WOLFE. It depends on the patients. A number of them are religiously inclined, and I think enjoy the prayer meeting. Some others do not at all. They do not care for it.

The CHAIRMAN. Do you compel them to go?

Doctor WOLFE. No, sir.

The CHAIRMAN. Doctor, in regard to the games they play, do you have croquet and tennis, and things of that kind, for them?

Doctor WOLFE. We have croquet, and some of the patients enjoy that. We have a tennis court, but I do not think I have seen the patients use it more than three times in six years. The class of women we get is from rather the lower orders of society who probably never had a tennis racket in their hands before they came to the hospital, and they do not care any more for it after they come there than they did before.

We have very pretty grounds, and the patients are permitted to be out in those grounds all the time. I have about 85 women there who have full parole of the grounds. When they wish to leave the building they simply go to the attendant and say they want to go out into the grounds, and they are permitted to have the free run of the grounds of the women's side of the house, with the stipulation, of course, that they are prompt at their meals and in before dusk.

The CHAIRMAN. Are the grounds of the women's department entirely separated from those of the men?

Doctor WOLFE. No; we have no fences, but we have very good landmarks that we can give them. Since I have been there, in five years, I have had three women patients who have violated the parole and gone beyond the marks, but our buildings are so well situated that they can not be far out of sight of a nurse; and as soon as a patient does that, of course she has her parole taken from her.

The CHAIRMAN. How large are the grounds, do you know? How many acres are there?

Doctor WOLFE. We have in the whole farm about 596 acres, I believe. Just what amount of that is devoted to park purposes and the purposes of the pleasure of the patients I couldn't say.

The CHAIRMAN. Do you raise your own vegetables there?

Doctor WOLFE. We do.

The CHAIRMAN. Do the patients do some of the work upon the farm?

Doctor WOLFE. Yes; quite a good deal. The women patients do not do very much, but the men patients do quite a good deal.

The CHAIRMAN. How do you employ your women patients; sewing and that kind of thing?

Doctor WOLFE. We have a sewing room that employs about 50 patients. The laundry employs about 100. We have a basket shop where they make willow baskets and raffia baskets that employs about 20. - Then we have a brush shop that employs about 20, and we have about 15 in the vegetable room in the kitchen.

The CHAIRMAN. You, of course, approve of employing them, do you not?

Doctor WOLFE. I do, decidedly. Of our 1,260 women we have about 650 who are doing something useful every day. Of course, it may be a very small amount.

The CHAIRMAN. Do you compel them to work if they do not want to?

Doctor WOLFE. No; but we encourage them as much as we can in various ways.

The CHAIRMAN. Do you pay any of them anything?

Doctor WOLFE. No. I had not finished with the entertainments that we have.

The CHAIRMAN. Excuse me.

Doctor WOLFE. I did not give you the summer entertainments.

The CHAIRMAN. You came to Saturday night and I thought you had finished.

Doctor WOLFE. The programme I gave during the week is for the winter entertainments. During the summer we vary that by having a band concert on Friday night instead of a ball, and by having picnics of various kinds. The thing that brought me back to that is that in our encouraging the patients to work we do it by giving the working patients more picnics and more entertainments than we do some of the other patients. Of course we do not deprive the other patients entirely of entertainment by any manner of means, but when there is any choice as to who shall go to some select party we try to select those who work.

The CHAIRMAN. The girls who are good can go. How about your kitchen? Do you have one general kitchen?

Doctor WOLFE. We have one general kitchen for the whole hospital. Of course in our infirmaries we have a little diet kitchen for the sick, but aside from that the cooking is done in one general kitchen.

The CHAIRMAN. How do you find that works as far as the service is concerned? Is the food sufficiently warm when it reaches the several dining rooms?

Doctor WOLFE. Since we have been enlarging of late, I think the dining rooms that are farthest away from the kitchen do suffer to some extent, but with our steam tables we are able to heat the food up again and keep it fairly hot. But I think we have come to about the end of the utility of that kitchen.

The CHAIRMAN. Did you make any particular examination of the food over here?

Doctor WOLFE. I did. I examined the dietary, and from the printed dietary I think they have a decidedly liberal diet. Then I went to the general kitchen and observed what they were cooking for their supper that night, and at least that meal lived up exactly to the dietary. Of

course it is very easy for a hospital to have a printed dietary and not live up to it, but as far as I can see they not only have a printed dietary but they are living up to it over there.

The CHAIRMAN. In your opinion, was the food good and properly cooked, as far as you could judge?

Doctor WOLFE. It was good and it was palatable. I tasted quite a number of the various things they had over there to eat. I examined the bread and the butter. I examined their milk supply. I went into the cold storage where they have their meats, and I found nothing anywhere there that I could find any fault with.

The CHAIRMAN. Doctor, do you use oleomargarine or fresh butter?

Doctor WOLFE. We use fresh butter.

The CHAIRMAN. Is there a law in the State of Pennsylvania with regard to that?

Doctor WOLFE. I understand there is.

Mr. SMYSER. Do you have any complaints by your patients as to your food?

Doctor WOLFE. Oh, yes. We expect that.

Mr. SMYSER. So that that is not peculiar to St. Elizabeth's?

Doctor WOLFE. No; and in a large institution it is just exactly as it is at home. While you may want to have things up to the mark every time, sometimes a little accident will occur that is no one's fault, and things will not be quite as nice as you may like to have them. We do not always pay attention to the complaints that the patients make. There are some patients who could talk to you about the food and would know what they were talking about and would not be unreasonable in any way. There are others who would be decidedly unreasonable.

The CHAIRMAN. How does the number of attendants in St. Elizabeth's compare with the number in your establishment? You said the patients were about the same?

Doctor WOLFE. They have a larger number. I figured it out the other day, and I think they run about one to eight while we run about one to nine.

The CHAIRMAN. What do you say in regard to the number of nurses and attendants? Would you rather have a greater number of nurses and attendants than your full quota?

Doctor WOLFE. Well, I don't think they have a bit too many there. I think Doctor White has done well to have as many as he has.

The CHAIRMAN. Do you know what the per capita cost of your patients is?

Doctor WOLFE. It varies a little from year to year, but it runs from \$3.60 to \$3.70 per week per patient.

The CHAIRMAN. How do you get your appropriation; from the State?

Doctor WOLFE. From the State or for the maintenance of the patients?

The CHAIRMAN. I said from the State, but I mean for the maintenance of the patients.

Doctor WOLFE. We get \$1.75 per week per patient from the county or township that is supporting the patient. In addition to that \$1.75 we are at liberty to draw on the State treasury for any amount up to \$2 per week per patient that we may need. That gives us a possible \$3.75 to be spent for the maintenance of the patients. That maintenance includes everything. It includes our supplies. It includes the

salaries of the attendants, the employees of the steward's department, and the physicians. It includes the ordinary repairs and everything we may need around about the hospital. If we want any increase in our buildings or any extraordinary repairs, we must have a separate appropriation from the legislature.

The CHAIRMAN. What did you think of the clothing of the patients that you saw at St. Elizabeth's?

Doctor WOLFE. I thought it was just about fair. It did not seem to me that it was quite as good as the women patients have at Norristown. I did not notice that in regard to the men patients, particularly.

The CHAIRMAN. You would notice the women, of course?

Doctor WOLFE. I thought it was very fair. I do not think there is any complaint to be made about it.

Mr. SMYSER. What do you say, Doctor, about the hours of the attendants? Are they too long, and would it be practicable to shorten them?

Doctor WOLFE. Well, I would like to see the hours of the attendants a little shorter, but, personally, I have never been able to figure out a plan that would be practicable whereby it could be done; and, considering the general character of the work, I do not think they are dreadfully ill used with that number of hours, because they are not on a muscular strain all the time. They have their morning work to do, and then at our hospital they take the patients out in the grounds. They have to take them out for at least one hour, and longer if the weather is such as to permit it. During that time they are simply sitting there with their general eye on the patients. The same thing occurs in the afternoon. They have at least an hour or two that they can sit down, either on the ward or outside in the grounds. So that while they are on duty that number of hours I do not think they work so very hard.

Mr. SMYSER. Do you have any means of restraint over there?

Doctor WOLFE. Yes; and we are using more restraints than I wish we were, but we have about 250 more women in the women's department than the buildings were built to hold, and that overcrowding makes some difference. We have probably from 10 to 20 patients restrained a day. Those patients who are restrained are restrained for medical or surgical reasons, because they injure themselves, or for some good reason. There is another reason, too. We have some old women who are rather feeble and inclined to bed sores. We do not like to keep them in bed all the time, so we may get them up for an hour or two during the day and simply tie them in a rocking chair by putting a sheet around them. We have all of those reported, so that there is no question of any abuse. No one is permitted to order restraint in our hospital except the physicians.

The CHAIRMAN. How much of a staff of physicians have you in your hospital, in your department?

Doctor WOLFE. I have four assistant physicians, and there are ten physicians in the whole hospital.

The CHAIRMAN. That is including you and the superintendent of the male department?

Doctor WOLFE. Yes. I have four assistants and he has three, and we have a pathologist.

The CHAIRMAN. Do you have a night physician on duty all night?

Doctor WOLFE. We have not. We have a night head nurse. We call her the night patrol. She goes around to the quarters of the various physicians and gets the orders for the night, and anything that is needed over and above that the doctor in charge of that particular ward takes care of. He has to be called.

The CHAIRMAN. You have a complete system of telephones there, of course?

Doctor WOLFE. Yes.

Mr. SMYSER. Doctor, one further question. Do you regard the restraint that you speak of as cruel?

Doctor WOLFE. I do not. I think the restraint of a camisole—and that is the only thing that has ever been used since I have been in that department, with the exception of one very bad case in which we used the leather wristlets—is a very much more humane manner of restraint than restraint by human hands, because the attendants are human, and after they have been hanging on to a restless struggling patient for a half an hour or an hour or two or three hours, you are going to try their patience and their temper pretty hard; and if there is nobody right around you are a good deal more likely to have ill usage from that manner of restraint than you are from an inanimate camisole.

Mr. SMYSER. It can not get angry?

Doctor WOLFE. No.

The CHAIRMAN. There is one thing I have not asked you about. Have you in your institution a system of hydrotherapeutics?

Doctor WOLFE. We use a modified system of hydrotherapy. We use the packs and some things that can be adapted to the arms, but we have no regular hydrotherapeutic plant. We are building a new building now in which we hope to incorporate that.

The CHAIRMAN. Did you see the one at St. Elizabeth's?

Doctor WOLFE. I did. I saw that one and I saw several others. I thought that compared very favorably with a number I have seen.

The CHAIRMAN. What kind of an operating room have you?

Doctor WOLFE. We have no operating room, we are building that; but I think the one at St. Elizabeth's is a very fine one and very well planned.

Mr. SMYSER. You mean by that it would be a convenient and desirable place to have a leg cut off? Is that it?

Doctor WOLFE. Well, if I had to have it done I think I would be willing to—

Mr. SMYSER. Go there?

Doctor WOLFE. Go there; yes. I would want to pick the surgeon, but I would be willing to go into that room.

Mr. SMYSER. But the nice surroundings do not appeal to me.

Doctor WOLFE. I think if you were to come to Norristown to the room where we have to operate and have the choice of the operating room there that we are using at the present time or the one over here, you would choose this one.

Mr. SMYSER. I would go back to my old Kentucky home over on the hill. [Laughter.]

The CHAIRMAN. Doctor, you say you have four physicians under you. Are they all men?

Doctor WOLFE. They are all women. The women's department at Norristown is entirely in charge of women.

Mr. SMYSER. You have complaints as to maltreatment not only from patients but perhaps from relatives, do you, or do you not?

Doctor WOLFE. Oh, my, yes. I just went through a course of that about two or three weeks ago.

Mr. SMYSER. So that is not peculiar to St. Elizabeth's Hospital?

Doctor WOLFE. Not at all. As Doctor Evans said yesterday, many of the relatives of the patients, while they are not insane still have a decided nervous tendency and are inclined to be unreasonable about a good many things, and that is the source of a good many complaints. Of course there is this about it. I have about 135 women attendants under me. I can not employ angels, and sometimes I get a girl in there who does what is wrong and the complaint is justified; but just as soon as there is any complaint or even the appearance of evil in any way in the institution, that attendant can not stay there. I think that is the most you can ask of any superintendent of a hospital of that kind.

Mr. SMYSER. You would not tolerate such treatment?

Doctor WOLFE. Not for a minute.

Mr. SMYSER. Doctor, do you not believe that is generally the spirit in which all our institutions are administered, and I include St. Elizabeth with all the other great institutions throughout the country?

Doctor WOLFE. I do not think there is any question about that. You can tell, if you are accustomed to it, by certain little signs as to whether the patients are in general kindly treated; and as I went around through the wards there at St. Elizabeth's I saw none of those signs. I made it my business to make certain little tests. I am always very suspicious on one of my wards when I go up behind a patient and put my hand on her shoulder to have her jerk like that [indicating], because it looks as though she has been in the habit of being on her guard. I tried that in a number of the wards there at St. Elizabeth's, but they did not seem to be at all surprised. They turned around and talked to me as they would to any friend.

The CHAIRMAN. Doctor, how often do you visit your several wards?

Doctor WOLFE. I have no regular times that I am supposed to go around. Of course my work to a great extent is executive as well as medical. The assistants at Norristown are compelled to go into the wards twice a day, morning and evening, and at other times if it is necessary for any reason. I try to get around once every other day, and in the wards where we have the acute cases or the sick I try to go every day, but I do not always accomplish that. Sometimes it may be at least three or four days between my visits. For instance, I went through the wards on Sunday, and owing to the trip down here I will not go through again until to-morrow.

The CHAIRMAN. Doctor, is there any construction in your building that has anything in the nature of a watch tower?

Doctor WOLFE. There is not on the women's side. On the men's side of the house they have what they call inspection boxes. There is an inspector who is stationed up about half a story above the second floor. All of our buildings are two-story buildings. There is a sort of cupola runs up, and he is a half story above the second floor. He sits there in a room, and he looks down the two wards of the upper floor, and then he has a system of mirrors whereby he can look down and by working these mirrors can get a view of the long halls of the

second floor. Of course he can not get a view into the rooms, but he can get a view of the long hall, and I understand where there is any question of disturbance or trouble anywhere he is supposed to leave that box, if he sees an attendant and a patient run into a room, or anything like that, and go right down and see what is going on.

The CHAIRMAN. Do you approve of that?

Doctor WOLFE. I have never seen any reason for using it on the women's side. Of course, the problems on the men's side may differ. I would not want to pass judgment on that, because I have never dealt with that class of patients.

The CHAIRMAN. Do you know how those inspection boxes came to be installed?

Doctor WOLFE. I understood there was a good deal of complaint of abuse, and at the time Doctor Chase was the head of the men's department, he had them installed. He felt sure that his people were properly cared for. Of course, in the end, you have to come back to the human quantity anyhow, because, if that inspector does not attend to his business, or wants to be in collusion with any of the patients, they can hit the patients right and left and he can sit there reading and never see it. They pay those men the same amount of money that they pay a man nurse who has charge of the whole of one of our sections, composed of four wards, and it seems to me it is a rather unnecessary expense. I would rather take that money and have so many more attendants.

Mr. HAY. How long has that inspection been in operation there?

Doctor WOLFE. I could not tell you the exact time. It has been there since Doctor Chase's time. That would be at least from thirteen to fifteen years. Whether longer than that I do not know.

Mr. HAY. Was that the result of an investigation?

Doctor WOLFE. I think it was, but I would not be positive about that, because I never went into the history of it.

The CHAIRMAN. Doctor, do you have pay patients as well as State patients?

Doctor WOLFE. We have in the women's department about 25 patients who pay \$5 a week. We will not permit anybody to come there who pays any more, because our hospital is overcrowded, and for \$10 or \$12 a week they can get care at the Pennsylvania Hospital for the Insane or at the Friends' Asylum, right there in Philadelphia, and we feel that under the circumstances of our overcrowding, if they are capable of paying that amount of money, they had better go there.

The CHAIRMAN. How far is Norristown from Philadelphia?

Doctor WOLFE. Seventeen miles.

The CHAIRMAN. Is it on the Pennsylvania road?

Doctor WOLFE. It is on one branch that runs up toward Reading. We are northwest of Philadelphia.

Mr. SMYER. Do you have any of the criminal insane?

Doctor WOLFE. Yes; we have quite a number of criminal insane. Of course the men's department has a great many more than I have. I understand that, counting what we call criminal and convict insane, both, they have about 125. I have, counting both, 19. There is a law in Pennsylvania, I believe, that states that any insane from the penitentiary shall go to the insane asylum which is nearest to that penitentiary, and having the eastern penitentiary, drawing from the whole



eastern part of Pennsylvania, at Philadelphia, of course we really get more than our quota of criminal insane.

The CHAIRMAN. You separate them, I suppose, from the others, do you not?

Doctor WOLFE. I do not think they are separated. You see, with my people, there are so few of them I could hardly do it. I only have 19 in all.

The CHAIRMAN. Do you not put them in a ward by themselves?

Doctor WOLFE. No; we are having a hospital for the criminal insane. It is not being built, but I believe they have bought a site for it, and expect the next legislature to make an appropriation for building a hospital for the criminal insane in Pennsylvania. Then they will all be taken out of our hospital.

Mr. SMYSER. How many patients do your wards usually accommodate?

Doctor WOLFE. The wards vary. The old wards are supposed to hold about 40 patients—the buildings that were erected when the hospital was first constructed; but some of our newer buildings have more patients to a ward. One building, for quiet, chronic, working patients, holds 60 patients to a ward, and that without overcrowding. That building simply has dormitories.

Mr. SMYSER. You have epileptics?

Doctor WOLFE. Yes; we have 85 epileptics among the women.

Mr. SMYSER. Are they segregated from the rest?

Doctor WOLFE. In certain wards: yes. I have three wards in which I place them. I might say that they are building a building for the epileptics in Pennsylvania, but I understand the intention is that they are only going to take those who are curable or capable of being improved.

The CHAIRMAN. Doctor, I think that is all the questions we want to ask you. We are very much obliged to you, indeed.

#### TESTIMONY OF DR. WILLIAM F. DREWRY.

Dr. WILLIAM F. DREWRY, being first duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor, where do you reside?

Doctor DREWRY. Petersburg, Va.

The CHAIRMAN. Are you in charge of an institution there?

Doctor DREWRY. Yes, sir; I am in charge of the Central State Hospital for the Colored Insane.

The CHAIRMAN. How many are there in the institution?

Doctor DREWRY. One thousand two hundred.

The CHAIRMAN. How many have you on your medical staff?

Doctor DREWRY. I have four assistants, and I usually have two internes.

The CHAIRMAN. Are the internes paid?

Doctor DREWRY. The assistant physicians are paid. The internes are not.

The CHAIRMAN. How many attendants have you?

Doctor DREWRY. The proportion is 1 to 15.

The CHAIRMAN. Do you have colored attendants?

Doctor DREWRY. Yes

The CHAIRMAN. What is the proportion between men and women in your hospital of the patients?

Doctor DREWRY. The females are somewhat in excess of the males.

The CHAIRMAN. How are your buildings arranged? Do you have separate buildings?

Doctor DREWRY. We have one very large building, built on what is known as the Kirkbride plan, and then we have cottages—pavilions.

The CHAIRMAN. How many do the cottages hold, usually?

Doctor DREWRY. It varies from 70 to 170. The cottages are two stories and the main building is three stories.

The CHAIRMAN. What is your per capita cost for the care of the patients?

Doctor DREWRY. It is about \$100. The average for the last ten years has been \$90.

The CHAIRMAN. Ninety a year?

Doctor DREWRY. Yes, sir. That is, the expense for the maintenance of the institution, not for the permanent improvements. The permanent improvements are a separate proposition.

The CHAIRMAN. I understand. Do you have the criminal insane there?

Doctor DREWRY. No, sir; we have a class there sent there by order of court; patients who have not been convicted; people who have been charged with crime.

The CHAIRMAN. You do not have any convicted criminals?

Doctor DREWRY. We do not have any convicted criminals. They are cared for in a separate ward at the penitentiary. There are only four or five there. That is a new law, passed about two years ago. Prior to that they were sent to us.

The CHAIRMAN. Do you do all the cooking for these people under your care in one kitchen?

Doctor DREWRY. Well, mainly. We have one large general kitchen, and then we have two or three small kitchens. We call them special diet kitchens, where the sick people are cared for—acute cases, and things of that sort.

The CHAIRMAN. Have you a regular hospital for both men and women?

Doctor DREWRY. A hospital ward for the sick?

The CHAIRMAN. Yes.

Doctor DREWRY. Yes, sir.

The CHAIRMAN. You have two of them, one for the men and one for the women, I suppose?

Doctor DREWRY. One for the men and one for the women.

The CHAIRMAN. Are there any pay patients at all in your institution?

Doctor DREWRY. No, sir; we have no pay patients. They are all indigents; all supported by the State.

The CHAIRMAN. You have visited St. Elizabeth's, have you not?

Doctor DREWRY. Yes, sir; I was there Monday afternoon.

The CHAIRMAN. Have you ever been there before?

Doctor DREWRY. Yes, sir. I have been there three or four times. I went there once in Doctor Godding's administration. I went there twice in Doctor Richardson's administration, and I have been there once, the other day, during the present administration.

The CHAIRMAN. Did you make as much of an examination of the institution as you could have in that space of time?

Doctor DREWRY. Yes, sir. I went over the management for about an hour with Doctor White, the superintendent, and then I went through several of the wards, several of the new buildings, some of the dining rooms, some of the kitchens, the hydro-therapeutic arrangement, and so on. We were gone about four hours and a half, I think.

The CHAIRMAN. What were your impressions of the institution?

Doctor DREWRY. I was very favorably impressed with nearly everything I saw, nearly everything I heard. The management of the medical part of the work seemed to be carried on up to modern ideas. The general care of the patients impressed me as very good. I saw the dietary. It seemed to be very good, quite excellent. I saw the kitchens, or some of them. I did not see the general kitchen. I saw the others. I saw the dining rooms. They were well equipped. I saw the wards. I saw the beds. I saw the character of the clothes the patients wore. I saw the attendants. I met the medical staff. I went in the office. I examined the method of keeping clinical records of the patients. I went in the pathological department. I went in the morgue, and I went in almost every division of the hospital. I was very much impressed, as a whole. It might have been there were some few little things, which of course you will find in every institution, that possibly I would have done another way. But, as a usual thing, they measured up to an excellent standard.

The CHAIRMAN. How much do you pay your own attendants?

Doctor DREWRY. We pay our attendants the ridiculous sum of \$10 to \$13 for the women and \$15 to \$20 for the men.

The CHAIRMAN. Do you have any professional nurses in the institution?

Doctor DREWRY. Yes, sir; we have two professional nurses now. They are paid more. They are paid \$22 a month. They are full-graduate nurses. They are excellent nurses.

The CHAIRMAN. Are they men or women?

Doctor DREWRY. They are women. One of those attends to the women's and the other to the men's side, as a general thing. They are graduate nurses.

The CHAIRMAN. Do you have anything in the nature of a training school, yourselves?

Doctor DREWRY. No, sir; we do not. We could not sustain it. We tried it, but our attendants are not sufficiently educated to take that training. They are trained in a practical way—bedside training—but I mean they are not sufficiently educated for regular lectures and things of that kind. They are given practical training, however, by these nurses, the assistant physicians, and myself.

The CHAIRMAN. What do you do for the amusement of your patients?

Doctor DREWRY. We have everything, from a watermelon feast up, I reckon. We have baseball, croquet, dances, cakewalks, and everything of that sort, everything that appeals to a colored man. Of course the character of amusements can not be the same as in a white institution. For instance, they would not care to play bridge whist. They would rather play crap. [Laughter.]

The CHAIRMAN. And so would I. [Laughter.]

Doctor DREWRY. But as a matter of fact we have everything. Every day there is something going on—marbles or croquet, or baseball, or going to the circus, or going to the parks for running races, quiltings—well, I don't know what not. We have graphophone entertainments, music, harps, jig dancing, clog dancing, and everything.

The CHAIRMAN. Do you have a farm there, Doctor?

Doctor DREWRY. Yes, sir; we have 500 acres. There is a picture [exhibiting picture] of one of the entertainments of a group of patients.

The CHAIRMAN. Do the patients work on the farm?

Doctor DREWRY. Yes, sir; quite a number.

The CHAIRMAN. Do they like to do it, usually?

Doctor DREWRY. Yes, sir; we have no difficulty in getting them to work. A great many of them ask to go out to work to get out of the wards. I think fully 75 or 80 per cent of our patients work at something. Almost the entire farm is cultivated by patients. We employ only five people.

The CHAIRMAN. Only five?

Doctor DREWRY. Only five people are paid employees on the farm. All the other work is done by patients.

The CHAIRMAN. Your buildings are in the farm? I mean to say the farm surrounds the buildings, does it not?

Doctor DREWRY. Yes, sir. We have one group of buildings, and then two colonies. That picture there is one of the colonies. There we have wood buildings, and canvas tents, and there we group and care for about 60 to 70 of the patients. We do not keep the same class of patients there all the time. We vary. During the course of the year nearly every patient is kept at these colonies. It is a kind of a summer resort to them, and they are sent there for two weeks, and that group is brought in and another group is sent, except the consumptives. The consumptives are kept at one of those colonies in tents.

The CHAIRMAN. You keep the consumptives in tents all the time, do you?

Doctor DREWRY. We keep the consumptives in tents all the time. We have been doing so for two or three years, winter and summer.

The CHAIRMAN. Did you investigate the food over here in St. Elizabeth's in any way?

Doctor DREWRY. I only saw some of the food in trays, and one or two of the kitchens. I saw a little of it; not very much. What I saw, though, was quite satisfactory. I was particularly pleased with the table service—the dining-room service there. They had white table cloths, and crockery ware, and knives and forks, and spoons, and all that sort of thing that you find in an up-to-date institution. In the large dining room I think the capacity of the table was 470—nearly 500, possibly. They did not have table cloths on those tables, yet the service was quite neat. They had arranged them for the breakfast, and they were very neat indeed.

The CHAIRMAN. How about restraints at your institution?

Doctor DREWRY. Well, I belong to that sentimental class of physicians who do not believe in it.

The CHAIRMAN. You do not use it?

Doctor DREWRY. No, sir; I do not use any. I believe someone said that was sentimentality; but it is not sentiment entirely. If it is, it is

a very pretty sentiment. I do not use restraint, because I tried to restrain years ago. I have been connected with the hospital twenty years, ten years as assistant physician. When I first went there twenty years ago we had about 400 patients, and 40 of them were in some kind of restraint. It was gradually reduced, until about eight or ten years ago we had—well, not that number, though the population had increased to about 1,000, or less than that—800, I reckon. Then I gradually reduced the restraint to a minimum, and eight years ago I abolished it entirely. Since then there has not been an article of restraint in the institution except once, and that one was a camisole, when Doctor Price, of Philadelphia, operated on a good many cases for us a year or two ago. We had one patient who was a very, very bad woman, and we thought we would have to use that to restrain her, surgically; but, as a matter of fact, the straight jacket, or camisole, is yet in the store-room. It has never been unwrapped.

The CHAIRMAN. How do you subdue an unruly patient? You must have some means?

Doctor DREWRY. That is right hard to say. It is a kind of a personal matter with the patient, but we use warm baths. We use a hot pack. We take a patient and wrap him up in a blanket wrung out in hot water, put him to bed, put ice to his head, and put a patient by his side, and usually that accomplishes what is necessary. She generally goes to sleep after she comes out of that, and if she is still refractory we put her under another. I have kept them there all night.

The CHAIRMAN. The pack is a form of restraint, is it not?

Doctor DREWRY. I do not think it is a form of restraint.

The CHAIRMAN. They can not get out.

Doctor DREWRY. No, sir; the attendant is sitting right along at the patient's side.

The CHAIRMAN. As a matter of fact, when the patient is put in a pack he has not as much latitude as he has in one of these cumisoles, has he?

Doctor DREWRY. That is all true, but the pack has a sedative effect on the patient, and I have never seen a patient that a strait-jacket did have a sedative effect upon. Of course the pack does restrain the patients because they can not move about.

The CHAIRMAN. I understand that perfectly. I have seen them packed.

Doctor DREWRY. At the same time it is a treatment, and the other I do not think is a treatment. It irritates the patient.

The CHAIRMAN. You think the pack has a calming effect and the other has the reverse effect?

Doctor DREWRY. I know it has. My experience was that to restrain a patient irritates a patient, and the patient being thrown with other patients it has a bad effect upon the other patients. The other patient does not know when his time is coming.

The CHAIRMAN. Have you ever had any trouble with complaints of cruelty?

Doctor DREWRY. Cruelty to patients by attendants; yes, sir; occasionally we have had. Occasionally we have had to discharge attendants for roughness to patients—neglect of patients. That is the same the world over. They all have that.

The CHAIRMAN. You do not think that could be absolutely avoided in any way?

Doctor DREWRY. No, sir; I do not. You get a class of attendants sometimes who will be cruel, but we have had attendants there who have been there for twenty years and have never been known to hurt a man or even to speak roughly to a patient. We have had others who would do that very quickly and would be discharged.

The CHAIRMAN. Do you have any difficulty in getting all the attendants you want?

Doctor DREWRY. We do not have any difficulty in getting men. We have difficulty, particularly in the summer; not in the winter, but in the summer we do. The negroes go off to the summer resorts and they live easy in the summer. We have more difficulty in the summer. That is, it is not alarming. We usually have sufficient.

The CHAIRMAN. You appoint all the attendants, do you not?

Doctor DREWRY. Yes; I appoint all the attendants, and the appointment is subject to the approval of the board of directors of the institution.

The CHAIRMAN. How many directors are there?

Doctor DREWRY. We have three directors for each institution, and we have four institutions. Then all the directors, the twelve, constitute what is known as the general board. That board manages all the institutions and appoints the superintendents; and the special board, three to each institution, appoints the assistant physicians and the steward and the clerk. Their appointments are subject to the approval of the general board. The superintendent appoints all the other employees, subject to approval by the general board.

The CHAIRMAN. When you say four institutions what do you mean?

Doctor DREWRY. The four institutions for the insane in the State, three for white and one for colored.

The CHAIRMAN. Is there a State board of lunacy in Virginia?

Doctor DREWRY. No, sir. I am sorry there is not. That is, we have that general board that manages the institutions. That board is appointed by the governor.

The CHAIRMAN. Do they visit your institution at stated intervals?

Doctor DREWRY. That special board, composed of three, visits our institution once a month, and occasionally they come in there, one or two at a time, during the interim. Then, once a year, the general board, the 12, including what is known as the commissioner, who is chairman ex officio of each of the boards, visits each institution. The commissioner visits the institution once a month.

Mr. HAY. You have what is called a commissioner, Mr. Lane?

Doctor DREWRY. Mr. L. W. Lane. He is commissioner; yes, sir.

Mr. HAY. He comes around any time?

Doctor DREWRY. He comes around regularly once a month, and then during the interval he simply drops in. He does not notify us. He just comes at any time. He just walks up in the superintendent's office and announces his presence.

The CHAIRMAN. Do you know anything about Doctor White's reputation among physicians for the insane?

Doctor DREWRY. Doctor White has a very good reputation. I had never met Doctor White until Monday, but I have heard of him through the medical press and read some of his articles. His standing is very good, indeed. He is regarded as one of the progressive men.

Mr. HAY. Doctor, is there any change you would suggest for the Government hospital?

Doctor DREWRY. Yes, sir; there are some few things. When I was over there the other day, I jotted down some things that occurred to me. In the first place, I think Doctor White has too much of a burden. I think the institution is too large. I think the superintendent ought to get around to each and every department of the institution at least once a week, but under existing conditions there, because of the size of the institution, I should think that would be a well-nigh physical impossibility, and yet I think it is a very proper thing for the superintendent to do that. I was told that a great many of the wards had night nurses. I do not know that I am absolutely clear about that, but I think in every institution there should be a night nurse on every ward. Then I think there should also be assistant physicians on night duty. They have an assistant physician there who, I understand, is up all night and subject to call. I believe, sir, that the institution ought to be inspected in a good deal of its parts, at any rate, every night by a physician. It would be better to have every ward in the house inspected at night, but at least the sick ward, the acute ward, the invalid ward, and as many as possible should be. I think they ought to have more land. I understood they had about four or five hundred acres. If I am in error about that I would like to be corrected.

The CHAIRMAN. That is about right. That is the size of the farm right there.

Doctor DREWRY. How many are there in the entire plant?

The CHAIRMAN. There are about 450 acres where the buildings are, and then in the upper farm there are another 400.

Doctor DREWRY. You have about 800 acres?

The CHAIRMAN. Yes.

Doctor DREWRY. That could be doubled with advantage to the institution. I think they should have gardening enough and farm enough to raise all the vegetables and other crops. By the way, they have an excellent dairy in that connection that I would like to mention. They were getting 300 gallons of milk a day, and that was quite large, I thought. I did not see the cattle, but I knew about it. The superintendent, Doctor White, spoke of the reduction in the use of physical restraints, that they had been gradually and rather rapidly reduced. They have been reduced, at any rate, and I think Doctor White is entirely on the right line. He has just one step further to go, and he is going there mighty fast, because he said he had only two or three in restraint. I saw, possibly, between 700 and 1,000 patients, I reckon, and I saw only one woman in restraint, and she was a colored girl who was pretty hilarious.

The CHAIRMAN. Doctor, what do you do over in your institution if you have people who have a suicidal or homicidal tendency, who try to maltreat themselves, gouge their eyes out, or something of that sort? You have some of those, have you?

Doctor DREWRY. I don't know that that exists as much with the colored insane as with the white insane—I mean the suicide. Homicide does. We have a good many patients who have a tendency that way. A suicidal case is put on an open ward on a corridor, and the attendant is required to be with that suicide all the time, night and day. He is never left a minute, and if the attendant leaves that patient a minute he gets his walking papers.

The CHAIRMAN. How can you do that if you only have a ratio of 1 to 15?

Doctor DREWRY. We do it. If it is a homicidal case, that case is put in a room by himself, and if he is a very bad case, a very dangerous case, no one attendant is ever allowed to go to that patient's room. He is always accompanied by somebody before he opens the door, because I do not care to get anybody hurt.

The CHAIRMAN. Did you hear the testimony of this man Gartrell yesterday?

Doctor DREWRY. Yes, sir; I heard it. I was talking part of the time and possibly missed a part of it. If that patient or a similar patient had made the same attack on me that Mr. Gartrell made on the attendant, whatever his name was, I should have protected myself. I should have handled the patient as gently as I could, but I should have held him firmly and should have tried to protect myself, and at the same time not hurting the patient if I could possibly avoid it. That is what I would have done if I had been the man who was attacked.

The CHAIRMAN. What did you think of the testimony of the attendant?

Doctor DREWRY. I think he was telling the truth.

The CHAIRMAN. Did you think he used any more effort than was necessary to protect himself from bodily harm?

Doctor DREWRY. It did not seem to me to be so.

The CHAIRMAN. At the time a wild man rushes at you, you do not have very much time to discuss gentleness, do you?

Doctor DREWRY. No, sir. The only thing I was not perfectly clear about was what the attendant was doing when the patient made the attack on him. I just missed that part of the testimony.

The CHAIRMAN. His testimony is, he was sitting down in view of the patient and had a card in his hand that he was reading, with his chair against the wall, and the patient ran and made an attack on him. He said he was reading a card.

Doctor DREWRY. Do I understand that attendant was put there to guard that patient?

The CHAIRMAN. To watch him.

Doctor DREWRY. Then he should not have been reading unless the doctor gave him instructions to read a card; but if he was put there to watch that patient he should have been watching the patient all the time. I think he did right, however, to protect himself after he was attacked.

The CHAIRMAN. How would you have treated that man after the attack was over, and after they had subdued him? Would it have been more humane in your idea to have these two men hold that patient than it was to put this camisole on?

Doctor DREWRY. No, sir; I don't know that it would have been. If I had a case of that kind—and I do have them—I should have put him in a hot blanket. I should have put that kind of humane restraint, and if he was very noisy I would not have hesitated to give him a hypodermic to give him sufficient sleep. That is a medical restraint. That, to my mind, given judiciously and carefully, does no harm. We do not use three doses on an average a week. We very seldom need it. If it is an extreme case I would give it. I would give something like what is known as hyoscine, a hypodermic.



The CHAIRMAN. Does that ever have any injurious effect on the patient?

Doctor DREWRY. Occasionally it has been reported, but I have been giving it ten years, and I have never seen any bad effects from it. I have heard of its being done. I have heard superintendents go so far as to say that they would not permit it to come into the institution. I have to be guided by my own experience, and I have never seen any bad effects from it, though it is possible. I watch it very closely. Mr. Chairman, if you will permit me, I would like to go back to these suggestions.

The CHAIRMAN. Certainly; proceed.

Doctor DREWRY. I think I left off at the objection to any form of physical restraint. Then, I would suggest, I think, an institution for epileptics entirely apart from the present hospital for the insane epileptics that go there. The consumptives they are caring for very well there on porches. They have glass windows, and so on. I went all through that the other day, and it is a good arrangement. I have seen it at other hospitals, and this one is as good as any I have seen anywhere of that kind; but I think it would be better if these consumptives were taken some distance away. It strikes me that this farm they have there would be an excellent place on which to colonize the consumptives, either in cottages or tents or anything of that kind. I think the tents are all right, temporarily, but cottages are better as a permanent proposition. I think they ought to be separated.

I think Doctor White told me that he received reports from the several departments, but I was not exactly clear on that. In fact my attention was called to something else; but if it is not done I think Doctor White and every superintendent should get a written report daily from the heads of the several departments, to be put on his desk, where they can be compiled, if necessary, by his clerk, so that he can keep up with the daily particulars.

The CHAIRMAN. Did you see the system of records there?

Doctor DREWRY. I saw the system of medical records, yes, sir; and I am going to take it home with me.

There is a system in a great many of the States of furloughing the patients. I think Doctor White told me that it was a personal matter; that he did furlough some cases; that cases that were improved were sent home. I think that could be carried out pretty extensively. I was told by one of the assistant physicians that the assistant physician read the burial service. Well, that is a very excellent thing. Of course it ought to be done in every case. The service ought to be read by somebody, but I think it ought to be done by a minister. I think that the assistant physicians should devote their time to the living rather than to the dead in that way. I think it takes their time, which time should be given by a minister. I presume the headstones are all marked; if they are not, it would be an excellent idea to do that.

I believe all the dead should be examined by a physician before they are taken from the ward as an extraordinary precaution against comment or anything else. It seals the mouths of people sometimes, who have complaint to make or who do complain.

They need more amusement hall, and I mentioned just now that they need more land and means of employing their patients. Their amusement hall has been already on the way, I understand.

I believe their institution ought to have, in addition to its regular board of managers, a system of inspection by some one who does not manage the affairs of the institution, call it what you choose, an advisory board, a board of charities, or a medical inspector, or something in that line. I do not know the conditions here, and I do not know what would be necessary. I know very well what we need in our State. We need a State board of charities, and they are working very earnestly for it.

The CHAIRMAN. You speak of physicians examining people when they die. What do you think of the propriety of performing autopsies?

Doctor DREWRY. I think that is all right.

The CHAIRMAN. Do you perform autopsies in your institution?

Doctor DREWRY. Yes, sir; we perform quite a number, quite a number. When a person dies we notify the relatives by telegram, or we notify the friends of the patient by telegram, and ask them if the remains were wanted to wire us at once. We wait several hours, perhaps twenty hours in some instances, and if it is near by we wait long enough to get a telegram. If we do not hear from them we hold a post-mortem in nearly all cases. We hold them too late sometimes.

Mr. SMYER. Why?

Doctor DREWRY. Well, they should be held earlier. I am not a pathologist, but we have a pathologist who tells me very frequently the examination should have been made earlier.

The CHAIRMAN. In other words, decomposition is so rapid that the autopsy should be performed at once?

Doctor DREWRY. Yes, sir.

The CHAIRMAN. Did you meet the pathologist, Doctor Blackburn, out here?

Doctor DREWRY. Yes, sir; and I met him a quite a number of years ago.

The CHAIRMAN. His reputation is high?

Doctor DREWRY. He is regarded highly in his profession. He has written a book on post-mortems which is used in almost every institution in the country.

The CHAIRMAN. Did you go into the department of pathology there?

Doctor DREWRY. Yes, sir.

The CHAIRMAN. What did you think of that?

Doctor DREWRY. It was pretty good. I have seen better, and I have seen a great deal worse. Ours is a great deal worse. [Laughter.]

Mr. HAY. What do you think of the superintendent having charge of the hospital in all its branches?

Doctor DREWRY. I do not think there is any argument except on one side. It is a one-sided proposition. I do not think the other side has any argument at all, according to my humble judgment.

Mr. HAY. You think the superintendent ought to have control?

Doctor DREWRY. He ought to have control of the institution, and he not only ought to have control of the institution, but he ought to have the appointment. We do not have it in our State.

Mr. HAY. You think he ought to have what?

Doctor DREWRY. He ought to have control of the institution, but he ought also to appoint everybody that serves under him, from his first assistant physician down to the janitor. He ought to appoint the whole corps, subject, of course, to the approval of the managers. I

think the superintendent ought always to have some kind of a check on him. I think everybody ought to have that.

The CHAIRMAN. But you do not believe in more than one boss?

Doctor DREWRY. No, sir; except at home. [Laughter.]

Mr. HAY. What do you think of the arrangement of the buildings there?

Doctor DREWRY. Well, that is right hard to say unless you had a plat before you; but just from a casual look, it seems that there was right much of a haphazard arrangement there. The new buildings inaugurated there by Dr. A. B. Richardson, who died there, and who was one of the ablest men we ever had there or anywhere else in this country, are arranged very well. Those new buildings are up to date, and the arrangements are all fine. The old ones are, I think, somewhat like a crazy quilt. It impressed me so.

Mr. SMYSER. Doctor, did you go through the wards containing the colored patients over here?

Doctor DREWRY. Yes, sir.

Mr. SMYSER. What do you think, by way of comparison, as to their character, their clothing, and their food? Did you observe their food? What do you think of that as compared with the patients in your institution?

Doctor DREWRY. I think it is about the same, sir. I did not see any amount of difference one way or the other.

Mr. SMYSER. You have three other institutions in Virginia?

Doctor DREWRY. Yes, sir; those are for the whites.

Mr. SMYSER. Which is the largest of the three?

Doctor DREWRY. The institution for the colored insane. That is the largest in the State.

Mr. SMYSER. Yes; but I mean of the white institutions?

Doctor DREWRY. The Western Hospital, at Staunton, is the largest of the three.

Mr. SMYSER. How many patients do they have there?

Doctor DREWRY. They have about 1,000, I think; yes, sir.

Mr. SMYSER. Do you know what the per capita cost is there?

Doctor DREWRY. At Staunton?

Mr. SMYSER. Yes.

Doctor DREWRY. I can approximate it, sir. It is about \$125 per year per patient.

Mr. SMYSER. What is it at the other two?

Doctor DREWRY. At the Eastern State Hospital, at Williamsburg, it is somewhat in excess of that—a few dollars; possibly it is \$132 or \$133 or \$134; and at the Southwestern Hospital, which is a much smaller institution than either of those, the per capita cost is about \$140, I think. I don't think I have it here, but I think I am about correct.

Mr. SMYSER. Excuse me, Doctor; while you are looking at that—

Doctor DREWRY. I am listening to you.

Mr. SMYSER. As to these three institutions for the white insane in Virginia, the per capita cost that you have given includes, does it not, the entire cost except for new work or general repairs?

Doctor DREWRY. It includes everything except permanent buildings, equipment, for which the legislature makes special appropriations. That is the case in all the institutions. Our State appropriates so

much money for each institution for maintenance, and then so much for improvements, and leaves it usually to the respective boards to apply that appropriation as they think proper. Occasionally they mention that they want this or that done, but that is not always the case.

Mr. SMYSER. Have you ever looked into the reasons for the difference in the cost per capita of your institution and any of the others?

Doctor DREWRY. For the last two or three weeks that has been a pretty live question, I will state, and they have had an investigation of the Eastern State Hospital, and have made a comparison, unfortunately, I am sorry to say, with me. I am preparing an answer, which I will file with the legislature; but I think there ought to be some difference, for the reason that our patients work more than the white patients. They have a larger farm. Take our laundry, for instance; we work 60 people at the laundry, scrubbing.

Mr. SMYSER. The old-fashioned way?

Doctor DREWRY. The old-fashioned way. We have some laundry equipments, but we use the tub simply because it means employment for a larger number of patients. That is the only reason it is done. The other is a better way; it is an easier way; but in order to give employment to these 60 patients we use the old method. We employ two launderers, and they look after the machinery.

Mr. SMYSER. Doctor, is it a fact that the colored patients are more disposed to work generally than the patients?

Doctor DREWRY. More disposed to work?

Mr. SMYSER. Yes.

Doctor DREWRY. Well, I don't know so much about that. Possibly they can be induced more easily to work, because all of them have been in the habit of doing manual labor.

Mr. SMYSER. That is what I had in mind.

Doctor DREWRY. It is in their line.

Mr. SMYSER. That is what I had in mind, exactly, but I did not know whether I was right about it or not.

Doctor DREWRY. That is right. In the employment of patients outside of the laundry, for instance, it is a common occurrence for us to have four or five hundred—that may sound extravagant to you, but it is correct—people that work on the farm, picking peas, gathering vegetables, or putting up hay.

Mr. SMYSER. Or whatever work you have to do on the farm?

Doctor DREWRY. Yes, sir; they are constantly making roads. We do not hire that done; the patients do it, and they assist in everything. We have a herd of nearly 100 cattle. We have one man to look after weight, but you would have to apply the test, I think, to practically that herd—one hired man—and the rest of the work is done by a certain class of patients.

The CHAIRMAN. Do the patients milk the cows, and all that sort of thing?

Doctor DREWRY. Yes, sir; they are put through a scrubbing every time and dressed up in white clothes and made sanitary in every particular.

Mr. SMYSER. How does the dietary of your institution compare with that of the other institutions of your State?

Doctor DREWRY. It is practically the same. We get the same grade of flour, the same grade of meal, the same grade of meats, and as a

usual thing there is not much difference. Possibly the white patients get, in some instances, a little better quality.

Mr. SMYSER. Have you a printed dietary of your institution?

Doctor DREWRY. Yes, sir; but I haven't it with me.

Mr. SMYSER. You have not?

Doctor DREWRY. No, sir; that is submitted to the board and approved.

Mr. HAY. We would like to have it in the record, Doctor.

Mr. SMYSER. I was going to ask if you would send it to us, if you please.

Doctor DREWRY. Yes, sir; I will do so.

#### TESTIMONY OF DR. HENRY C. EYMAN.

Dr. HENRY C. EYMAN, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you reside, Doctor?

Doctor EYMAN. At Massillon, Ohio.

The CHAIRMAN. Are you superintendent of the State hospital there?

Doctor EYMAN. I am.

The CHAIRMAN. Is that institution maintained entirely by the State of Ohio?

Doctor EYMAN. Wholly by the State, yes, sir.

The CHAIRMAN. How many patients have you there?

Doctor EYMAN. About fifteen hundred patients.

The CHAIRMAN. And how many attendants have you there? I mean, what is the proportion of attendants to patients?

Doctor EYMAN. About 1 to 17 at the present time, because we are short now. It would probably be 1 to 15 if the quota were full?

The CHAIRMAN. How many men and how many women are there in the institution?

Doctor EYMAN. In ours?

The CHAIRMAN. Yes.

Doctor EYMAN. Now there are about 850 men and 650 women. There are about 100 or 150 more men than women in the institution, usually.

The CHAIRMAN. How many have you on the medical staff?

Doctor EYMAN. Five, regularly, although we expect to put another on as soon as I get home, making 6.

The CHAIRMAN. You said you had 5 on your medical staff?

Doctor EYMAN. We have regularly five on the staff, but we are expecting to appoint another when I get back. Just now one assistant has got married and left me, and we have now four besides myself.

The CHAIRMAN. Have you a woman physician on your staff?

Doctor EYMAN. No, sir.

The CHAIRMAN. Are you the superintendent of the hospital, and as such have you entire control of it, both from a medical standpoint and from a general administrative standpoint?

Doctor EYMAN. Yes, sir.

The CHAIRMAN. Do you approve of that rather than the dual system that has been spoken of here in regard to other institutions?

Doctor EYMAN. I think, most assuredly, there should be one supreme

authority, although I think possibly the business affairs of the institution and the administrative affairs could well be left to a layman under the direction of the superintendent.

The CHAIRMAN. But you believe in the system as carried out in your institution and as carried out over here in St. Elizabeth's, in having one man in absolute control?

Doctor EYMAN. I certainly do.

The CHAIRMAN. Who attends to purchasing the supplies at your institution?

Doctor EYMAN. My financial officer, the steward.

The CHAIRMAN. Is he appointed by you?

Doctor EYMAN. He is presumed to be. [Laughter.] That is the law.

The CHAIRMAN. Such men as Judge Smyser, here, sometimes have something to say about it?

Doctor EYMAN. Judge Smyser has never bothered me in the least.

The CHAIRMAN. But you mean that sometimes the appointment—

Doctor EYMAN. I mean that there are influences brought to bear which make it almost impossible to appoint, sometimes, some one who would be of your own selection.

The CHAIRMAN. How is it with the other employees?

Doctor EYMAN. They are absolutely under the appointment of the superintendent. The appointments of the assistant physicians are confirmed by the board, but they never interfere in the least with that. Other than that, the superintendent employs and discharges at his own pleasure.

The CHAIRMAN. Of whom does the board of managers consist?

Doctor EYMAN. It consists of five members appointed by the governor.

The CHAIRMAN. Is that an honorary position or are they paid?

Doctor EYMAN. It is purely honorary.

The CHAIRMAN. How often do they visit the institution?

Mr. SMYSER. Permit me to ask a question. You mean they are paid nothing except their traveling expenses?

Doctor EYMAN. They get their expenses.

Mr. SMYSER. Do you not have a per diem?

Doctor EYMAN. There is no per diem.

The CHAIRMAN. How often do they visit the institution?

Doctor EYMAN. They visit the institution every month; but sometimes between times; frequently between times they make visits. Those visits between times, however, are either called meetings, or social visits purely.

The CHAIRMAN. So there is no inspection on the part of the board of managers except at stated times?

Doctor EYMAN. No, sir.

The CHAIRMAN. Is there a State board of lunacy?

Doctor EYMAN. There is not.

The CHAIRMAN. There is none at all?

Doctor EYMAN. There is none.

The CHAIRMAN. Is there any inspection made of your institution by officials at times when you know nothing of their coming?

Doctor EYMAN. Yes, sir; the State board of charities have access to the institutions at all times, and very seldom indeed do they warn us of their coming. There are times when they do not even send for a carriage, but come out on a car and come to the institution.

The CHAIRMAN. Do they come to the institution frequently?

Doctor EYMAN. Not so frequently as we think they ought to. Sometimes it runs along for six months without their visiting us. They are supposed to come more frequently, however. The State of Ohio is divided into districts, so far as the State board of charities is concerned.

The CHAIRMAN. You approve of the appointment of a board of lunacy in the State of Ohio?

Doctor EYMAN. Yes; properly drafted.

The CHAIRMAN. Do you know something of the workings that were testified to here yesterday in regard to the New York board of lunacy?

Doctor EYMAN. Yes, sir; it was organized after I came into the service, and I followed it very carefully. They have had considerable friction, but I think they are now in a position to do excellent work, and I think we could probably start in where they are now without friction.

The CHAIRMAN. What do you think of the appointment of a similar board for the District of Columbia?

Doctor EYMAN. I do not think that it is necessary. I don't see the object of it. You only have one institution and you would not need a lunacy commission. Possibly an inspector appointed by the honorable Secretary of the Interior, or something of that kind, would be absolutely all that is necessary.

Mr. HAY. Do you think this institution ought to be subject to inspection at times without the authorities there being informed of it?

Doctor EYMAN. I think that is a protection to any management to have that sort of inspection. It gives the people more confidence in the management, and therefore it is a protection to the management.

The CHAIRMAN. That, you say, is done in Ohio entirely by the State board of charities?

Doctor EYMAN. Yes, sir.

The CHAIRMAN. And you say you would prefer to have them come to the institution more frequently than they do?

Doctor EYMAN. Yes, sir; for the protection of the management. I think if they would come weekly I would prefer it.

The CHAIRMAN. Have you a series of buildings in your institution?

Doctor EYMAN. Yes sir; our institution is wholly upon the cottage plan.

The CHAIRMAN. How many patients do these cottages hold?

Doctor EYMAN. They hold from 48 to 75.

The CHAIRMAN. And how much ground have you?

Doctor EYMAN. Five hundred and sixty acres.

The CHAIRMAN. Have you a farm there? Do you raise vegetables?

Doctor EYMAN. Yes, sir; we raise an immense quantity of vegetables. Last year we raised everything in the way of table vegetables that we used practically, and in figuring the cost of vegetables that gives us what we would have had to pay out in that way during the year, and it amounted to over \$20,000.

The CHAIRMAN. What does your institution cost per capita?

Doctor EYMAN. We have three or four ways of figuring it. Figuring it without the officers' salaries, during last year the per capita was \$108; with the officers' salaries it was \$115, including clothing. I want to say that I probably made a misstatement awhile ago, when I was asked if the institution was wholly supported by the State. It is

not so. The clothing is furnished by the various counties. Including that, it ran up to \$156 last year.

The CHAIRMAN. Of course any extraordinary expenditure is taken care of by a separate appropriation from the legislature?

Doctor EYMAN. Yes, sir.

The CHAIRMAN. Does that include the cost of these vegetables? Does it include everything?

Doctor EYMAN. These vegetables were produced there without scarcely any cost. We raised at least \$18,000 worth of vegetables, net. For instance, in the production of these \$20,000 worth of vegetables we only had three men employed. The labor was wholly by patients. We have a head gardener, a head farmer, and a teamster, and the balance of the labor is patients.

The CHAIRMAN. Do the patients in your institution work in any other way than on the farm?

Doctor EYMAN. Yes; they work in various ways. We do not have shops as much as they do in some places, but I would like to say that in this matter of labor for patients I disagree with most of the superintendents in their statements that the patients should have congenial labor. I do not think that is necessary. It is not necessary for a man who has been a clerk in a store to be put into clerical work. He is probably better off if he goes outside and wheels a barrow, or goes behind the plow, or uses a hoe. It is work that they need, and not necessarily congenial work.

The CHAIRMAN. What is the pay of your attendants?

Doctor EYMAN. The female attendants—the trial attendants—start in at \$16. That is only a trial. After the trial they start at \$18 and run up to \$22. The men trial attendants start at \$25, and after that they run from \$27 to \$32.

The CHAIRMAN. Do you have a training school out there for nurses?

Doctor EYMAN. We do.

The CHAIRMAN. Do you try to induce all the attendants to take your course of training?

Doctor EYMAN. It is compulsory upon all attendants to take the training school course.

The CHAIRMAN. Both men and women?

Doctor EYMAN. Both men and women.

The CHAIRMAN. What do the physicians receive there?

Doctor EYMAN. The assistant physicians start in at \$600, and they get \$200 a year increase until they reach \$1,200.

The CHAIRMAN. Do you succeed in keeping physicians very long at that salary? Do they stay in the institution very long?

Doctor EYMAN. Well, some do. I think myself that there ought to be some arrangement made to perpetuate the service better. For instance, in our institution no assistant is allowed to be married. That is simply a rule of the institution. It is not a law of the State at all.

Mr. HAY. How does that work, Doctor?

Doctor EYMAN. Well, when they want to get married they go away. Just a few days before I left a young man came and told me that he was going to get married. He knew what the consequences would be, and he packed his grip and went that same day.

Mr. HAY. What I mean is, how does that operate as regards the good of the service? Is it for the good of the service, or is it not?

Doctor EYMAN. If the assistant physicians could have residences on



the grounds, and away from the administration building somewhat, I think it would be desirable to have married assistants, but if the wife of the assistant physician is to reside in the administration building without employment, that is undesirable. She is not subject to the rules of the institution at all, you know.

The CHAIRMAN. Do you have a separate house for yourself, Doctor?

Doctor EYMAN. I do.

The CHAIRMAN. Do any of the physicians?

Doctor EYMAN. No, sir; they room in the administration or office building.

The CHAIRMAN. How about the female nurses?

Doctor EYMAN. They have a separate building for both men and women nurses.

The CHAIRMAN. And does that include the attendants, too?

Doctor EYMAN. Yes, sir.

The CHAIRMAN. What other people sleep in the administration building?

Doctor EYMAN. On the third floor of this building the outside employees, such as the laundry help and the kitchen help, etc., have their rooms—on the third floor.

The CHAIRMAN. The people who actually have the care of the insane all have their places away from the building in which the insane are confined?

Doctor EYMAN. Yes, sir. I encourage married attendants, while I do not encourage married assistants, and we have a great many married attendants, and we arrange it so that they can have rooms together. They go off duty absolutely at 8 o'clock, and are not on duty at all in the morning until they are called on in the morning. That gives us an opportunity to get married attendants.

The CHAIRMAN. What are the hours of the attendants?

Doctor EYMAN. They are from half past 5 to 6—they use half an hour getting up, you know—until 8 o'clock at night.

The CHAIRMAN. Every day?

Doctor EYMAN. They get half a day each week, they get every third Sunday, they get a week every six months, and then any extra time that they ask for they get without any objection. That is purely a courtesy, however. There is no rule on the subject. It is purely a matter of courtesy to the attendants.

The CHAIRMAN. But you have made that a rule?

Doctor EYMAN. That is a rule of the institution; yes, sir.

The CHAIRMAN. Tell us what method of restraint you use in your hospital?

Dr. EYMAN. I was educated in the nonrestraint school, and therefore we use very little restraint. We use this camisole that has been spoken of here, and the resting sheet, which is probably not restraint, but treatment.

The CHAIRMAN. Is that the pack?

Doctor EYMAN. No; but we use the pack. Of course that is treatment. That is not restraint. I regard the resting sheet as purely treatment. The patient is placed in bed and the sheet is fastened to the four corners of the bed. There are armlets in it, and the patient puts his arms out through the armlets. He can turn on either his side or stomach or back and have absolute liberty in that direction, but he can not get out of bed. That is for patients who will stand up if they

are not confined and put to bed in that way. They will stand up, and they may have oedema of the legs, swelling of the feet, etc., and it is undesirable to have them stand up. You could not make them lie down unless you had some arrangement of that sort. That is used very seldom, however.

The CHAIRMAN. Do you use the leather wristlets at all that have been spoken of during the course of this investigation?

Doctor EYMAN. No, sir; not in the fifteen years that I have been a superintendent have I ever used one.

The CHAIRMAN. Have you any criminal insane in your institutions?

Doctor EYMAN. We have.

The CHAIRMAN. Those, of course, are separated from the others?

Doctor EYMAN. No, sir; they are with the other patients. We have made efforts to separate them. We have formulated a law, which has passed, and a commission has been appointed to build an institution for the criminal insane.

The CHAIRMAN. A separate institution?

Doctor EYMAN. A separate institution, absolutely.

The CHAIRMAN. You do not approve, of course, of having to put the criminal insane with the others?

Doctor EYMAN. No, sir. I have written and talked and worked on that matter for ten years, until we have succeeded in having the legislature take cognizance of it and make the appropriation.

Mr. SMYER. They have now made the appropriation, have they?

Doctor EYMAN. Yes, sir; and the land is purchased at Lima, Ohio.

The CHAIRMAN. You visited St. Elizabeth's the other day, did you not, Doctor?

Doctor EYMAN. Yes, sir; I visited there several times, and I was there yesterday, to-day, and the day before.

The CHAIRMAN. What do you do with the epileptics? Do you separate them entirely?

Doctor EYMAN. We have very few epileptics in our institution. We have a separate hospital for epileptics in Ohio, but a long course of chronic insanity frequently develops epilepsy and therefore we have a few in the institution that have developed after those patients have been in the institution nearly fifteen years.

The CHAIRMAN. Have you a building for both kinds of epileptics? Insane epileptics and epileptics whose minds are not—

Doctor EYMAN. At first they only took the noninsane epileptics; now they are taking both kinds at the hospital for epileptics.

The CHAIRMAN. How frequently have you been at St. Elizabeth's?

Doctor EYMAN. I visited here, I think, in Doctor Godding's time, once or twice, and several times during Doctor Richardson's time. He was a personal friend of mine. This is the second time since Doctor White has been there.

The CHAIRMAN. From your observation, what do you think of the institution generally?

Doctor EYMAN. It is a very good institution. There has been a progressive bettering of its condition ever since the first day I saw it, up to the present time. It more than compares favorably with other institutions of its kind.

The CHAIRMAN. Do you think there is a sufficient amount of ground there to employ all the insane people, who otherwise could not be employed?

Doctor EYMAN. I do not know the conditions about employing people here. There would not be sufficient gardening spot there to employ our people, or anything like that. It would require probably 300 acres of land.

The CHAIRMAN. What proportion of patients do you employ?

Doctor EYMAN. Fully 75 per cent of the men and 63 to 65 per cent of the women.

The CHAIRMAN. Do you force them to work?

Doctor EYMAN. No, sir; but we do everything we can to encourage them, by giving them extra privileges. For instance, if there is a circus that comes to town, we will say, "Everybody who has worked goes to the circus; those who don't work do not go." In anticipation of going to the circus, or anything of that kind, we do not have much trouble in getting them to work. Then the men like a little better grade of tobacco than the State furnishes, and they get a little better grade if they are working people. In order to get a little bit of good tobacco they will work for it. We do not exclude entirely those who do not work, but they do not get the same quality or the same grade.

The CHAIRMAN. I wish you would tell me about the amusements you have for your patients.

Doctor EYMAN. I am sometimes called a fanatic on the subject of amusements. We have all kinds of amusements that it is possible to have in an institution, every day in the week, except Sunday. We go to church on Sunday.

The CHAIRMAN. What kind of amusements do you have?

Doctor EYMAN. On Monday nights, during the winter time, we have what we call an "at home." That is probably one of the best appreciated amusements we have for the patients. They all gather together. We make the people in one cottage the hosts, or hostesses, as the case may be. They prepare for it. They know a week or so ahead that they are to be the hosts or hostesses for the next "at home." They prepare for that by bringing in all the flowers they can get, or, in the winter time when they can not get flowers, they get the decorations from the greenhouse. They ask permission to make coffee, and they will have buns, or cake, or ice cream. Then they play cards, and checkers, and chess. Then they have Manhattan billiards, or Klondike billiards. It is not an ordinary billiard table, but it is one that can be moved from one place to another. We have ping pong and everything of that kind that can be played indoors.

We always have every week a party for them, a ball, and I think very probably other institutions have it. Every week we have either a lecture or a vaudeville entertainment, or a minstrel show, gotten up by our own people. We have a hospital dramatic club which presents a great many of those, and, as is the case in other places, we get entertainment from the town. Of course, they are not as good as at Morris Plains, probably, because we are not near New York, but we get very fair entertainment. During the summer we have baseball, croquet, tennis, pitching rings, and every thing of that kind, and on Friday afternoons of every summer day we have a picnic and concert in the grove.

The CHAIRMAN. Do you have a band there at the institution?

Doctor EYMAN. Yes, sir.

The CHAIRMAN. Are they attendants?

Doctor EYMAN. Yes, sir; attendants and patients.

The CHAIRMAN. And patients?

Doctor EYMAN. Yes, sir. The only trouble about having patients in the band is that the patients who can play usually get well and go home, and it leaves a hole in your band.

Mr. SMYSER. How about football?

Doctor EYMAN. Massillon has the champion football game of the world.

The CHAIRMAN. Did you look at the medical side of the hospital out at St. Elizabeth's?

Doctor EYMAN. Yes, sir.

The CHAIRMAN. Did you notice the hydrotherapeutic system?

Doctor EYMAN. Yes.

The CHAIRMAN. What do you think of that?

Doctor EYMAN. We came to Washington and copied our hydrotherapy largely after the Washington plan.

The CHAIRMAN. You think it is up to date?

Doctor EYMAN. We think we improved a little on it, of course, because we built ours since they built theirs; but as I say, we came and copied it, showing that we had every confidence in its proper construction.

The CHAIRMAN. You went to the operating room, too, did you not?

Doctor EYMAN. Yes, sir. It is the best I know of, in any State institution or public institution. Of course, the ordinary general hospitals may have better. The Mount Sinai, probably, has the best I ever saw.

The CHAIRMAN. What do you think of the treatment the patients receive from the attendants and nurses there generally?

Doctor EYMAN. It seemed to me to be uniformly kind; at least as kind as in any institution I have been in. Of course, going through as we did they would be on their good behavior anyhow, and it might not be a fair test, but I saw no evidence of anything else but kind treatment.

The CHAIRMAN. How about the care of the institution, so far as cleanliness is concerned?

Doctor EYMAN. It is perfectly clean. The physical condition of the institution is excellent, and the cleanliness of the patients seemed to be correct.

The CHAIRMAN. How about the clothing of the patients?

Doctor EYMAN. The clothing of the patients was good. It did not seem to me to be quite so good as the clothing we give our patients, but then there is a thing that has to be taken into consideration. It is very hot weather, and everybody looks more or less dilapidated on this kind of a day. They had their vests off and their coats were open, and necessarily they did not look quite so good as they would on a cooler day.

The CHAIRMAN. Doctor, you are acquainted with the sources from which these people are drawn at St. Elizabeth's?

Doctor EYMAN. Yes, sir; and that makes a great deal of difference in the character of the patients. The class of patients they receive are hardly to be compared with the character of patients we get from the rural counties in Ohio, for instance.

The CHAIRMAN. In other words, it increases the difficulties of the institution to receive patients from practically all parts of the globe, because some of them come from the Philippines—soldiers.

Doctor EYMAN. It necessarily to a large degree increases the difficulties.

Mr. HAY. Doctor, have you any changes to suggest as to the control of the Government Hospital for the Insane here?

Doctor EYMAN. No, I can not say that I have. There are some things that would probably present themselves to me if I were in charge there, that I would want to change, just as Doctor White is doing. For instance, the dairy is entirely too close to the buildings. I would move it away back somewhere. But the fact that the dairy is so situated is not Doctor White's fault. It was there before he went there, I expect.

Mr. HAY. I am not referring to that particularly, but I would like to have any suggestions you may care to make along that line.

Doctor EYMAN. I would certainly move that dairy away from there. The dairy and the pigpens should be moved as far back as you have land to put them on.

The CHAIRMAN. Do you raise hogs out in Massillon, Doctor?

Doctor EYMAN. Yes, sir; I did until last year. I lost 1,000 head of hogs by cholera.

Mr. HAY. The Agricultural Department did not save those hogs for you?

Doctor EYMAN. I sent for the State veterinary surgeon the second day after the disease broke out when we had lost only 11 hogs, but it went on until we lost 915. We had only 85 left.

The CHAIRMAN. Do you have any criminal insane?

Doctor EYMAN. Yes, sir.

The CHAIRMAN. How about epileptics? Do you have any of those?

Doctor EYMAN. We have very few—just those that develop in our hospital.

The CHAIRMAN. Do you think it would be desirable for the District of Columbia to have an absolutely separate institution for epileptics here?

Doctor EYMAN. I do not think it would be practicable. I think it would be very desirable to have a different building on those grounds, and under the same management, which I think they probably have at the present time.

Mr. HAY. Why could not the Government have a separate institution for epileptics.

Doctor EYMAN. It would be desirable from every standpoint except that of economy. It would be extremely extravagant.

The CHAIRMAN. How about the criminal insane there?

Doctor EYMAN. I would make the same answer to that, exactly.

The CHAIRMAN. The only possible reason, then, for saying that it would be unwise to have a separate building would be on the ground of economy?

Doctor EYMAN. From the standpoint of economy; yes, sir.

Mr. HAY. What do you think of the size of the institution?

Doctor EYMAN. It is too large. Any institution that holds more than 1,000 patients is too large.

The CHAIRMAN. Why, Doctor?

Doctor EYMAN. Because the superintendent can not come in contact with all of his patients, which is very desirable in connection with the management of any institution.

The CHAIRMAN. How frequently do you go over your entire institution?

Doctor EYMAN. I aim to see every patient in the house at least every week. Those in the acute and hospital wards I see just as frequently as I can—three or four times a week.

Mr. HAY. Would it be practical for the District of Columbia to take care of its own insane, and permit the Government Hospital to take care of the soldiers and sailors, and people of that kind?

Doctor EYMAN. Without having any specific information on that subject, I should say that I certainly think it would be practicable, but I do not know what the conditions would be.

Mr. HAY. We have about 1,200 there from the District of Columbia.

Doctor EYMAN. That is ample for one institution.

The CHAIRMAN. You say you do not think any institution ought to have more than 1,000 people. In order to house the 2,600 people that are over there it would mean we would have to have three institutions?

Doctor EYMAN. Yes.

The CHAIRMAN. How much would be the additional cost, in your judgment, for three institutions to take care of these 2,600 patients rather than one?

Doctor EYMAN. It would be simply the additional cost of the necessary buildings—I mean the administrative buildings necessary to contain them. You would have to have a plant built for each one. The running expenses would not be any greater than they are now.

The CHAIRMAN. Except for the salary of the superintendent?

Doctor EYMAN. That is such a small item, divided into one thousand parts, that it would cut very little figure.

The CHAIRMAN. Do you have all the cooking done in one general kitchen at your institution?

Doctor EYMAN. We have one general kitchen and we have a hospital diet kitchen.

The CHAIRMAN. The food is all cooked in one kitchen and sent to the several cottages?

Dr. EYMAN. No, sir; we have a congregate dining room—the finest in the world.

The CHAIRMAN. Your patients all dine in the same dining room except those who are in the hospital? Is that it?

Doctor EYMAN. Yes, sir; except the infirm class of patients. The food is taken to them.

The CHAIRMAN. How many does this dining room accommodate?

Doctor EYMAN. One thousand.

The CHAIRMAN. Do you approve of that plan?

Doctor EYMAN. I do. The food has better supervision, and the service has better supervision. I require a physician to be present at every meal, and I require two supervisors to be present at every meal, so that there can not be any improper food used, and so that if there is any shortage of food or any food that is improperly cooked the information comes to me, and it can be corrected.

The CHAIRMAN. The kitchen is in the same building as the dining room?

Doctor EYMAN. No, sir; it is a separate building, but we serve the food hotter than you can get it at a hotel, for this reason. We have a table with coils that are kept perfectly heated. Then our serving pans are probably 14 inches high and 10 inches square, with an asbestos

bottom. They are set directly upon these heated coils. The food is placed in those and is wheeled in that manner to the serving room of the dining room, and from there they are taken in those large pans, not dished out in separate dishes, to iron tables, and served directly from the iron tables onto the tables that have the plates for the patients. So the food is served steaming hot every day.

The CHAIRMAN. Did you look at the food at St. Elizabeth's?

Doctor EYMAN. I did. I went all through the general kitchen, and some other kitchens.

The CHAIRMAN. What did you think of that?

Doctor EYMAN. Splendid. They had splendid food. I could sit down and eat it at any time I am hungry, and I am nearly always hungry. [Laughter.]

The CHAIRMAN. I suppose you sometimes have complaints about improper food in your institution, do you not?

Doctor EYMAN. Yes, sir; but we do not have nearly as much complaint as we had before we had this constant supervision of the food.

The CHAIRMAN. Do you ever have complaints from the patients themselves or from friends of the patients in regard to cruelty?

Doctor EYMAN. Yes, sir; that is a common heritage.

The CHAIRMAN. You think these complaints occur in every institution for the insane?

Doctor EYMAN. I think so; unless we could get angels for attendants, and they seldom apply.

The CHAIRMAN. Do you have any difficulty about getting attendants and nurses?

Doctor EYMAN. We have difficulty about getting A No. 1 nurses and attendants. We have plenty of applicants, but a great many of them are of a class that you would reject upon inspection the moment you saw them.

Mr. HAY. I suppose some of the complaints are founded on fact, and that sometimes you have to discharge attendants?

Doctor EYMAN. Yes, sir; it is not an uncommon thing. Not a year passes that we do not have to discharge several attendants for cruelty to patients. There is a class of attendants that is going over this country—I call them “asylum tramps.” They go to one institution and stay there until they get enough money to get away, or are discharged for cruelty, and then they go to another institution. The mere fact that institutions are looking for attendants makes it possible for them to get employment.

The CHAIRMAN. Do you have trouble in keeping up your quota of attendants?

Doctor EYMAN. Yes, sir; we do; not that we have not enough applicants, but we have not enough applications of desirable attendants.

The CHAIRMAN. Doctor, you were here yesterday when the Gartrell case was gone into?

Doctor EYMAN. I was.

The CHAIRMAN. From the testimony that was given, what did you think of the case?

Doctor EYMAN. I do not believe, from the testimony I heard yesterday, that there was any undue violence used. It is necessary to use force oftentimes, but I do not believe there was any undue violence used.

The CHAIRMAN. What would you have done in that case? You say you do not believe in mechanical restraint. Is that one of the cases for which you would have used your camisole?

Doctor EYMAN. I would have either used the camisole or the resting sheet—one or the other. I would have put that fellow in some sort of restraint. Restraint is of three kinds, you know—mechanical restraint, chemical restraint, and manual. Of the three, I think the chemical restraint is the least cruel.

The CHAIRMAN. Did you see this man Gartrell when you were at the hospital?

Doctor EYMAN. Yes, sir; I saw him last night.

The CHAIRMAN. What did you think of him?

Doctor EYMAN. Well, his eyes were very badly bloodshot, but it was of such a nature that it could not have been caused by a blow. The lower half of the eyes were all full, the sclerotica, and the upper half was clear. Had it been caused by a blow it would have been diffused; or had it been caused by choking, which sometimes causes bloodshot eyes, it would have been diffused, and general, over the sclerotica. The condition I saw could only be caused, in my opinion, by gouging the eyes like that [indicating]. I do not believe anything else could cause it at all.

The CHAIRMAN. In other words, your opinion was that this injury was self-inflicted?

Doctor EYMAN. Yes, sir; if he had been my patient, from the examination I made, I would necessarily have come to that conclusion, I think. I do not see how I could arrive at any other conclusion. He had scratches over his body, as was explained yesterday. There were no bruises on the body. If there were bruises on the body on Sunday they have disappeared by this time. There were absolutely no bruises on the body.

The CHAIRMAN. Did you look at the ribs that were said to be broken?

Doctor EYMAN. Yes, sir. I did not make a complete examination of every rib, but where he said the point of pain was I examined it. When his attention was not attracted to it there was no evidence of pain. When his attention was attracted to it it would hurt him like everything; but if it was distracted it was not very evident.

The CHAIRMAN. Did you talk to him about this particular incident?

Doctor EYMAN. I did. In reference to that he said: "I had one of those spells." He said: "I sometimes get spells like epilepsy, and when I get them I would kill anybody." He said: "I would kill you if I would get one right now." Then he said: "I cut my wife's throat one night. She was lying by me and I had an attack and I cut her throat right off, and I killed my children." He said: "I hit my children in the face with a flatiron"—I believe he said. Of course they were all delusions.

Mr. SMYSER. How long have you been superintendent at Massillon?

Doctor EYMAN. Seven years in November since I went to Massillon.

Mr. SMYSER. Were you superintendent in any other State institution in Ohio prior to that?

Doctor EYMAN. I was. I was at Cleveland—at what is known as the Newburg institution—between eight and nine years; also the Toledo institution as assistant, and also at Athens institution as assistant.

Mr. SMYSER. First you were at Athens, then at Toledo, then super-



intendent at Newburg, and then when Doctor Richardson came here you——

Doctor EYMAN. I succeeded him there at Massillon.

The CHAIRMAN. Have you known Doctor White for some time?

Doctor EYMAN. Yes, sir; I have known Doctor White. I think I met him first about the time he took charge over here—nearly three years ago, I think.

The CHAIRMAN. What is his general reputation?

Doctor EYMAN. Doctor White's general reputation in his profession, from the alienistic standpoint, is excellent. Our association is governed wholly by a council of twelve members, and as a sort of vote of confidence this year Doctor White was made a member of that council.

The CHAIRMAN. What association is this you speak of?

Doctor EYMAN. The American Medico-Psychological Association.

The CHAIRMAN. Is that composed of alienists?

Doctor EYMAN. Yes, sir; alienists of the United States and Canada, superintendents, and those who devote special attention to neurology and psychology.

Mr. SMYSER. Your institution is the model institution that you know of, is it not?

Doctor EYMAN. Oh, yes, sir. [Laughter.] It is undoubtedly that. It is a new institution.

Mr. SMYSER. And it would be no reflection upon St. Elizabeth's if it was not quite up to the standard of the Massillon institution, would it?

Doctor EYMAN. Not at all. [Laughter.]

Mr. SMYSER. That is all. I just wanted to have that on the record.

The CHAIRMAN. You think it is pretty nearly up to the standard, do you not?

Doctor EYMAN. The new part of it is wholly up to it.

Mr. SMYSER. There is one other thing, Doctor, that I was going to ask you, as to the home, a separate building for the superintendent. What are your notions on that subject?

Doctor EYMAN. I think it is absolutely essential to the best management of an institution that the superintendent should get away from the patients, away from the environments of the institution, so that he can come back to his patients the next morning tainted with sanity, from an association with sanity.

The CHAIRMAN. That applies also to the attendants and nurses?

Doctor EYMAN. Yes, sir.

The CHAIRMAN. You saw the nurses' home at St. Elizabeth's, did you not?

Doctor EYMAN. Yes, sir.

The CHAIRMAN. What do you think of that?

Doctor EYMAN. If Judge Smyser was not here I would say it was better than ours.

Mr. BARCHFELD. What percentage of curables do you have?

Doctor EYMAN. You mean the patients in the institution now?

Mr. BARCHFELD. Yes.

Doctor EYMAN. Oh, not 10 per cent. You must remember that the mass of the patients in any institution, where you have been taking patients for a good number of years, simply represents the accumulated mass of incurable patients.

Mr. BARCHFELD. The others are discharged?

Doctor EYMAN. Yes; we are discharging a good many, and their places are filled by others; and the incurables remain, don't you know?

Mr. BARCHFELD. They discharge about 10 per cent of the patients as cured?

Doctor EYMAN. No, sir; about 30 or 40 per cent of the patients admitted each year recover, and then probably 10 per cent may die. That leaves 50 per cent among the incurables again, so that if the institution is running a great many years, this 50 per cent makes an accumulated mass of incurables.

Mr. SMYSER. Have you as nice and pleasant an operating room at Massillon as they have out here?

Doctor EYMAN. Yes, but it is not as large. It is just as good for its size.

Mr. SMYSER. Yes; I presume so. If I ever have to have a leg cut off I am coming over to Massillon, though.

The committee, at 12.20 o'clock p. m., took a recess until 2 o'clock p. m.

#### AFTER RECESS.

The committee reassembled at the expiration of the recess.

#### TESTIMONY OF DONALD G. MITCHELL, JR.

DONALD G. MITCHELL, jr., having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you reside, Mr. Mitchell?

Mr. MITCHELL. At New London, Conn.

The CHAIRMAN. What is your business?

Mr. MITCHELL. At present?

The CHAIRMAN. Yes.

Mr. MITCHELL. I am managing the estate of a relative.

The CHAIRMAN. In other words, it is just a private business?

Mr. MITCHELL. Yes, sir.

The CHAIRMAN. What was your business three or four years ago?

Mr. MITCHELL. I was superintendent of construction.

The CHAIRMAN. For whom?

Mr. MITCHELL. The Government here.

The CHAIRMAN. Connected with the Department of the Interior?

Mr. MITCHELL. Yes, sir.

The CHAIRMAN. Did you have anything to do with the St. Elizabeth's Hospital new buildings?

Mr. MITCHELL. I was superintendent of construction for the entire new group of buildings.

The CHAIRMAN. The contract for those was made by Doctor Richardson, was it not?

Mr. MITCHELL. Yes, sir; the Interior Department and Doctor Richardson.

The CHAIRMAN. Were you the governmental inspector?

Mr. MITCHELL. Yes, sir.

The CHAIRMAN. And your duties were to see that the buildings were constructed in accordance with the contract?

Mr. MITCHELL. In accordance with the contract—the plans and specifications, yes, sir.

The CHAIRMAN. Did that take you over to the hospital grounds constantly?

Mr. MITCHELL. I was there constantly all the while during the construction.

The CHAIRMAN. Did you go every day?

Mr. MITCHELL. Every day, the entire day.

The CHAIRMAN. What have you to say in regard to the construction of those buildings?

Mr. MITCHELL. Well, I will say that those buildings were put up absolutely in accordance with the plans and specifications, without any deviation whatever, except inasmuch as Doctor Richardson and myself saw occasion for a change for the advantage of the betterments or improvements. Then, if any change was made, of which there were a few, a written order was given to the contractors to make the change, and it was sanctioned and approved by the Secretary of the Interior. No change whatever was made in the plans in any respect involving an increased expenditure or a lessened expenditure, or even the change of the location of a door or window, or the recutting of a door, or a new window, or anything without a written order approved by the Secretary of the Interior.

The CHAIRMAN. You have been over there, I suppose, and you have seen those floors. Have you not?

Mr. MITCHELL. Yes, sir.

The CHAIRMAN. How do you account for that?

Mr. MITCHELL. I am at a little loss to account for it. I will say this, that the floors were in every way up to specifications. It was a new method of putting down fireproofing, and it had not been very much tried. The top floor was laid on that fireproofing. The top floor was of very excellent quality of material, and it has rotted and it has disintegrated very badly in places. That did not take place until after the expiration of the time during which the contractors were liable for any imperfections in material. It took place a year—from a year to a year and three or four months—after the acceptance of the building, and then it began to take place gradually.

I started an investigation, to see for my own information, what caused it, and I never carried it out to a conclusion, because I left the institution about that time; but I understand that the same thing has occurred in some buildings about the city that were built of the same general construction and about the same time. I have been so informed. I got this far, that I asked the contractor that put in the fireproofing about it, if he had had anything of that sort happen, and he told me that he had heard of such things occurring in the Ontario and in the Stoneleigh Court, and he was going to give me further information on it, and I was going to look the matter up further, but I never got any further with it. It is a matter that the contractors could not have been held for, even if it had occurred before their time limit had expired, because it was not due to any defect of material at all. In my mind, it is entirely due to a chemical action taking place in the timber fill under the floor—having an alkali action on the wood. It is a case of dry rot. That is what it is—dry rot.

The CHAIRMAN. Have you ever known of it before in any buildings that you had charge of?

Mr. MITCHELL. No, sir; I never had any of that type of floor before. It is a new type of floor—I mean the under floor, below the wooden floor.

The CHAIRMAN. The construction is the usual construction, is it not, of steel beams and terra cotta arches?

Mr. MITCHELL. No; I beg your pardon. It is the steel beams, but it is a reenforced concrete arch. There is no terra-cotta arch. The original specification called for a terra-cotta arch, or alternates of different types of construction. I don't know as you recollect it, but at the time the bids were asked for for those buildings the act called for an extension in the hospital of a thousand beds, and so on. The bid exceeded the amount of the appropriation, and every reduction possible was made to bring the cost of the building down to the appropriation. To do that this type of floor was adopted. I do not say that this type of floor is not good. It is all right—that is, constructively, and in the way of fireproofing—but I think that in the future as this goes on they will use a little different method, probably, to protect the wood floor above from any such action as has occurred. As I say, it has occurred in other buildings. I have heard of it in other buildings in the city of Washington. I never heard of it anywhere else. I have not been around with a view to looking into it. That is all. Very likely it has occurred in other places.

The CHAIRMAN. Do you think there was anything that could have been done in the construction of that building to have prevented that? Is there any possible way in which you could have determined anything of that character while the construction was going on?

Mr. MITCHELL. I do not think it would have been determined beforehand, at all.

The CHAIRMAN. Was the character of the wood that was put down in that floor as good as that which was called for in the specifications?

Mr. MITCHELL. Absolutely. We went to considerable trouble to get the quality of floor that was specified, and we rejected quite a little. We went further than that. On the floor question we did something that we did not do on any other part of the work that I know of. We called over from the city of Washington one of the local inspectors, or surveyors of lumber, here, to pass on the quality of flooring that was put in there, and he pronounced it absolutely correct and up to the specifications in every respect, with the exception of course, that we rejected now and then half a car or so of lumber that was not up; but it was very carefully surveyed and gone into.

The CHAIRMAN. So far as the wood is concerned, you are quite certain that the fault did not arise from the quality of the lumber?

Mr. MITCHELL. I do not think there is any question about that at all.

#### TESTIMONY OF DR. W. W. RICHARDSON.

Dr. W. W. RICHARDSON, having been duly sworn, was examined, and testified as follows:

The CHAIRMAN. Doctor, where do you reside?

Doctor RICHARDSON. At Columbus, Ohio.

The CHAIRMAN. Have you any connection with one of the insane asylums?

Doctor RICHARDSON. Yes, sir; I am assistant physician at the Columbus State Hospital.

The CHAIRMAN. How long have you been in that position?

Doctor RICHARDSON. About two years and eight months.

The CHAIRMAN. Where were you before you went there?

Doctor RICHARDSON. I went directly from the institution here, the Government Hospital for the Insane, where I had been an interne for about three months. Before that I had been an interne of the insane department of the Philadelphia Hospital for about three months. That is my only official connection with institutions for the insane.

The CHAIRMAN. Where did you graduate?

Doctor RICHARDSON. At the University of Pennsylvania.

The CHAIRMAN. Are you a son of the Doctor Richardson who was out here?

Doctor RICHARDSON. Yes, sir.

The CHAIRMAN. Have you been over to St. Elizabeth's since you have been here this time?

Doctor RICHARDSON. Yes, sir; for portions of several days I have been over there.

The CHAIRMAN. How many patients are there in the Columbus hospital?

Doctor RICHARDSON. There are 1,600, approximately.

The CHAIRMAN. What is the proportion of attendants to patients?

Doctor RICHARDSON. About one to thirteen.

The CHAIRMAN. So that there are more attendants here than there are in Columbus?

Doctor RICHARDSON. Yes, sir.

The CHAIRMAN. A greater proportion of attendants to patients?

Doctor RICHARDSON. Yes, sir.

The CHAIRMAN. How many are there on the medical staff at your institution?

Doctor RICHARDSON. We have eight—the superintendent, five regular assistants, an interne, and a pathologist.

The CHAIRMAN. You have all classes of patients at the hospital?

Doctor RICHARDSON. Yes, sir.

The CHAIRMAN. Do you have as many women as men?

Doctor RICHARDSON. We have about 730 women and about 860 men. We have more men.

The CHAIRMAN. Is there a woman doctor connected with the institution?

Doctor RICHARDSON. Yes, sir; and there has been for the last five or six years.

The CHAIRMAN. Is there one single superintendent?

Doctor RICHARDSON. Yes, sir.

The CHAIRMAN. Is it the same system as obtains—

Doctor RICHARDSON. At Massillon; yes.

The CHAIRMAN. And here?

Doctor RICHARDSON. Yes, sir; at Massillon and here.

The CHAIRMAN. Well, doctor, considering your knowledge of St. Elizabeth's and the knowledge that you have of the institution with which you are now connected, how do you think they compare?

Doctor RICHARDSON. I think that St. Elizabeth's is fully the equal of the hospital where I am, and I think it is superior in a number of respects.

The CHAIRMAN. Is it superior in equipment?

Doctor RICHARDSON. Yes, sir; it is superior in equipment, take it all the way through.

The CHAIRMAN. In what respect?

Doctor RICHARDSON. In the equipments, for one thing; and I think the dietary is a little superior—those two particulars. I think possibly the system of note taking and record keeping is a little better than ours. I think the methods, for instance, of handling the milk, which have been changed since I was there, are better than anything we have. They have a pasteurizing plant there which is very excellent. Those are some of the things that I think of offhand—the equipment particularly.

The CHAIRMAN. Have you large grounds around your place?

Doctor RICHARDSON. We have approximately 300 acres of ground, about 100 acres of which are under cultivation. The rest is used for pleasure grounds.

The CHAIRMAN. The part that is under cultivation—what is it; a truck garden?

Doctor RICHARDSON. It is only partly a truck garden. About one-third of it, I should say, is used as a truck garden, and the rest is used for general farm purposes for raising farm products.

The CHAIRMAN. Do you, in your institution, have your own cattle?

Doctor RICHARDSON. You mean for dairy purposes?

The CHAIRMAN. Yes.

Doctor RICHARDSON. No, sir; we do not.

The CHAIRMAN. You buy your milk?

Doctor RICHARDSON. We buy it in this way. There is a gentleman who has a herd of cattle, and he milks his cattle in our barn at the hospital, but he owns them. It is entirely separate from the institution management, but from the fact that the cows are milked in our barn we have more or less supervision over the quality of the milk.

The CHAIRMAN. What do you think of the care of patients generally over here at St. Elizabeth's?

Doctor RICHARDSON. I think, both from my experience when I was officially connected with the institution and from what I have seen during the last few days, that it is very good—excellent. They use less restraint now, I think, than they did when I left there. I am quite sure of that fact; and the conditions under which patients are taken care of, especially in the new buildings, can not be compared now with what they were when I was an interne there. There is less crowding. The buildings are more hygienic, and the general condition of the patients seems to be much better than it was when I was there as an interne.

The CHAIRMAN. What kind of restraint do you use in the hospital where you are now?

Doctor RICHARDSON. We use the camisole, mainly. In a few instances we use the leather strap, with the wristlets, on a few very intractable cases. We occasionally tie patients in bed, and restrain them with sheets for short periods.

The CHAIRMAN. Have you a system out there in Columbus of hydrotherapy?

Doctor RICHARDSON. Yes, sir; we have such a plant, very similar to the one here. It has just recently been installed. We installed it within the last year.

The CHAIRMAN. You approve of that method, I suppose, do you not?

Doctor RICHARDSON. Yes, sir. We find that we get very good results. We have it in connection with our acute receiving building, where we receive our favorable cases. It is used mainly there. We

find that we get very excellent results in building up the strength of patients and toning up the nervous system. In every way we consider it an excellent adjunct to the treatment.

The CHAIRMAN. Do you often have complaints of cruelty on the part of attendants toward patients?

Doctor RICHARDSON. Yes, sir; we have them frequently. There is not a week goes by scarcely that we do not have to investigate charges like that.

The CHAIRMAN. Are the charges usually made by the patients themselves?

Doctor RICHARDSON. Either by the patients themselves or by their friends. We get them from each source.

The CHAIRMAN. How do you investigate those cases?

Doctor RICHARDSON. We investigate them by first questioning the patient minutely as to just what the character of the abuse was. Then we usually call the employees out, those that we think may know anything about it, either directly or remotely, and we question them individually and apart, and go into the question in that way just as thoroughly as we possibly can and as impartially; we view the whole past record of the attendant and what we consider the general stamp of the attendant or the nurse to be. We take all those things into consideration.

Mr. HAY. Do you ever have to discharge any attendants on account of that?

Doctor RICHARDSON. Yes, sir; we have those things occur not infrequently.

The CHAIRMAN. Do you have difficulty in getting attendants?

Doctor RICHARDSON. We have difficulty in getting really good ones. We have applications right along, but we find very few, though, who prove to be what we want. We are constantly changing attendants.

The CHAIRMAN. Do you find the same difficulty that Doctor Eyman spoke of in getting these men who go from one institution to another?

Doctor RICHARDSON. Yes, sir; we have those so-called "hospital tramps." They do not usually stay very long. We usually find them out very soon, before they have been there very long. Something happens that makes them undesirable for the service, and they usually go on their way.

The CHAIRMAN. Doctor, in going through the wards of a hospital can you determine by the way the patients greet the attendants, or the attendants greet the patients, as to whether they are properly treated or not, do you think? Did you hear Doctor Wolfe here this morning?

Doctor RICHARDSON. Yes, sir; I did.

The CHAIRMAN. She gave testimony in which she said that if she went up to speak to a patient and found that the patient drew back she thought that was almost immediately cause to make some investigation.

Doctor RICHARDSON. I never observed that or heard of it before as being at all an invariable sign. I think that may, no doubt, have its weight, but you would have to apply the test, I think, to practically all of the patients in a ward, because one individual may have a particularly nervous temperament. I think it may have its weight, but I would not apply it solely. I do not think that any particular test would be absolutely convincing.

The CHAIRMAN. It is very difficult, anyway, to get at the real truth of the matter, is it not, when a patient makes a charge of cruelty?

Doctor RICHARDSON. It is very difficult. It is one of the most perplexing problems a superintendent and the assistants have to deal with, I think.

The CHAIRMAN. Do patients who complain of ill-treatment tell the same story when it comes to details often? Are their minds in such a condition that they can tell the same story twice in the same way?

Doctor RICHARDSON. It depends entirely on the case. I have seen patients who were in such mental condition that they told the same story right along and stuck to it, and in those cases we found in some instances they were true and in some they were not. Patients are often very skillful in manufacturing a complaint against an attendant who they think has persecuted them in some way. On the other hand, I have had patients who gave a very incoherent and uncertain story where the charge was found on investigation to be true. I do not think you can place any dependence in the story of the patient himself. You must rely more upon your own investigation.

The CHAIRMAN. And the physical condition of the patient, I suppose?

Doctor RICHARDSON. Certainly. That must have great weight.

The CHAIRMAN. I mean to say, if you leave a patient apparently in good physical condition on one day and you find on the next that he has bruises or scars upon him, whether there was complaint made or not, you would then make an investigation?

Doctor RICHARDSON. Yes, indeed; I had such a case only recently. We always investigate ever bruise, scratch, or anything of that kind that we see on a patient. We ask the patient first his account of the way in which it came about, and then we ask the attendants or nurses.

The CHAIRMAN. Does that same system obtain over here at St. Elizabeth's?

Doctor RICHARDSON. It did when I was there, and I have reason to believe that it does still.

The CHAIRMAN. How does the food over at St. Elizabeth's compare with the food at your institution?

Doctor RICHARDSON. It is fully as good, I think. From the printed bill of fare I would judge it is a trifle better than ours, although I do not think the difference is very great. I saw some of the food there. I saw the food brought in and I noticed that they were having fresh blackberries. That is something that we have not had at our institution yet this year.

The CHAIRMAN. But do you get any more fruit or any more delicacies, as you may call them, in your institution than they do over here?

Doctor RICHARDSON. I think not. I was talking to the chief cook this morning in the kitchen, the large kitchen. I asked how many times they had strawberries this year, and she said they had strawberries eight or nine times, I believe, for the patients. I know that is somewhat in excess of what we have had. Just judging from that one thing alone, I should suppose they have fresh fruit as often as can be expected in an institution of that kind.

The CHAIRMAN. Do you have oranges and bananas and things of that kind?

Doctor RICHARDSON. We have bananas in the winter season, occasionally, all over the house. Oranges we give only to the sick. We use them in conjunction with our treatment of the sick.



The CHAIRMAN. How is your institution supported? By the State entirely?

Doctor RICHARDSON. Entirely. I will make one exception to that. The counties and friends furnish the clothing, but apart from that it is entirely a State institution.

The CHAIRMAN. The general State law applies to your institution as well as the Massillon institution?

Doctor RICHARDSON. Yes, sir. The per capita of our institution, including ordinary repairs, is about \$160—that is, excluding clothing. Including the clothing, it would amount to \$180 to \$190.

The CHAIRMAN. Are there any reasons that you know of why St. Elizabeth's should have a larger per capita cost than you have?

Doctor RICHARDSON. I think there is one very good reason, because they have relatively a greater number of employees than we have. We have 225 employees, in round numbers, and they have 700, and they pay their employees almost uniformly greater wages than we do. I think that is the main reason for it.

The CHAIRMAN. The character of the patients, coming as they do to St. Elizabeth's, from the Army and Navy, and from the population here in the District, and from Federal Homes, would make an increase in the expense, would it not?

Doctor RICHARDSON. I should think it might, possibly.

The CHAIRMAN. Do you have a large number of colored patients?

Doctor RICHARDSON. No; we have comparatively few colored patients. I presume, offhand, that we have not more than 3 per cent.

The CHAIRMAN. You do not have any criminal insane at all, do you?

Doctor RICHARDSON. Yes; we do.

The CHAIRMAN. And that class of patients would be taken account of in the State?

Doctor RICHARDSON. Yes; that is the present intention.

The CHAIRMAN. How about epileptics? Do you have those?

Doctor RICHARDSON. We have some. Our State institution, which takes both the sane and insane epileptics, is not sufficiently large to provide for all the insane epileptics in the State, so that I think all of the State hospitals have a few. I know we have. I presume we have, all told, about forty or fifty epileptics in our hospital.

The CHAIRMAN. Do you separate them?

Doctor RICHARDSON. No, sir; they are not separated. They are simply classified according to their general mental condition. If they are disturbed they are put in our disturbed ward. If they are quiet and tractable they are put in with the quiet patients. We have epileptics, I presume, in almost every ward in the institution.

The CHAIRMAN. It would be advantageous if you could separate them, would it not?

Doctor RICHARDSON. I think it would be desirable to have a separate cottage for them.

The CHAIRMAN. Are they separated over in St. Elizabeth's?

Doctor RICHARDSON. Yes, sir; I was in a female cottage where the female epileptics are kept. I was in there yesterday. I understood that all the female epileptics in the hospital were there, and I was also over in the wards where the male epileptics—all of them—were kept. I saw both of them.

Mr. SMYSER. Situated as they are over here, what do you say as to their classification and supervision?

Doctor RICHARDSON. I think it is excellent. I think it is admirable.

The CHAIRMAN. From your experience, running over several years over there at St. Elizabeth's, do you think they are progressive in the care of the insane?

Doctor RICHARDSON. I think so, in practically every particular. I do not see that the institution has deteriorated in any respect. In fact, as I say, I think it is progressing, and rather rapidly, too.

The CHAIRMAN. Is it progressing in lessening the amount of restraint that is used?

Doctor RICHARDSON. It is, quite decidedly. I think I am in a position to say that, because I was on the wards and saw the amount of restraint that was used when I left the institution about two years and eight months ago. I am sure they were using more restraint then than they are now. I do not think there is any question about it.

The CHAIRMAN. From your knowledge of St. Elizabeth's, gained previously, have you any criticisms that you could make of the government of the institution?

Doctor RICHARDSON. I do not see anything in connection with the management at all that I could pick any flaws in. I do not think of a single thing. I think there might be some change in the location of buildings, etc., as Doctor Eyman suggested this morning. I think it very desirable to have the piggery and those buildings back away from the others. I think that is a very desirable change.

The CHAIRMAN. Do you think it would be advantageous to erect buildings on the farm so that the people who work on the farm could live right on the place?

Doctor RICHARDSON. They have not such a very large class of patients there who are capable of doing farm work. It might be, probably, that that could be done to advantage in a small way, but it would be, I think, at a greatly increased expenditure. I understand they are now working about a dozen patients down there, and while they are probably able to do a necessary amount of work, no doubt others could be worked to larger advantage; but I think the cost of keeping a large number of patients down there and erecting buildings and carrying the supplies there would be proportionately very great. But it might prove advantageous. I am not fully prepared to say about that.

The CHAIRMAN. What is the percentage of men and women in your institution who do some work—manual labor?

Doctor RICHARDSON. I think there are fully 50 per cent of the patients there who do some service, either out in the domestic department or on the farm, or about the wards, helping with the ward work.

The CHAIRMAN. How does that compare with the percentage over at St. Elizabeth's, do you know?

Doctor RICHARDSON. I do not believe there is that large a percentage, from my general experience, capable of doing work there. They have so many old soldiers, and people who are practically incapacitated—people of that class. I would not think, offhand, that they have nearly as large a proportion as we have. We get a different class of people, an agricultural class, people who are usually able-bodied. We have nothing like as many bedridden cases as they have over here, in proportion.

The CHAIRMAN. Do you think that is probably due to the fact that the old soldiers and the old sailors come in here?

Doctor RICHARDSON. I think that is largely the explanation.

Mr. HAY. Doctor, do you know of any reason why a soldier or a sailor should be harder to take care of in an institution than any other class of people?

Doctor RICHARDSON. No, except for this reason, that men like that have usually knocked around the world more and have probably learned more about vicious habits, and if they go insane they are liable to be a little harder to handle. Soldiers and sailors, in my experience, are usually a little more pugnacious than the average private citizen. That would be the only reason that occurs to me.

Mr. HAY. Do you give your epileptic patients the same food that you give the others?

Doctor RICHARDSON. We do.

Mr. HAY. Is that considered to be the kind of treatment they ought to have?

Doctor RICHARDSON. No; I do not think it is done there in the institution for epileptics, but we have so few, compared with the whole number, that it is not practicable for us to segregate them, or the superintendent has not found it desirable to make a change. We do in isolated cases, but most of our cases we consider to be absolutely incurable. None of them have attacks of any great frequency, and we find that we can control it by medicinal methods fairly well.

Mr. HAY. How do you amuse your inmates?

Doctor RICHARDSON. We have, during all except the summer months, a weekly dance every Thursday night, and we have, at irregular intervals, entertainments of various sorts. We get up our own entertainments and we have entertainers from the city who come there, and in that way we have extra entertainments during the winter months frequently, though not regularly. We have parties occasionally, where one ward will entertain the better class of patients from the other wards. That is done especially on the female side. They have their little card parties, etc. In the summer time we take the patients to circuses and State fairs and little picnics occasionally. We always have a big Fourth of July celebration.

Mr. HAY. Do you have croquet?

Doctor RICHARDSON. Yes, sir; we have all those things. That is indulged in among our better class of patients. We have a good ball team every Saturday afternoon for their amusement.

Mr. HAY. Do you have cards and chess?

Doctor RICHARDSON. Yes, sir; particularly on the male side the men are great card players and checker players. Then we have a piano in nearly every ward, and in nearly every ward there are some patients who can play and entertain the others. Those are the chief amusements.

Mr. SMYSER. Doctor, I understand you to say that if you were the superintendent out here you would have that piggery moved.

Doctor RICHARDSON. That is a suggestion that occurred to me off-hand as being advisable.

Mr. SMYSER. What would you do if Congress would cut out the appropriation for that purpose and make no provision for another?

Doctor RICHARDSON. It would naturally stand where it is and could not be transferred until they saw fit to do it.

Mr. SMYSER. That is not a feature of the administration of the institution that is chargeable to the administration itself, is it?

Doctor RICHARDSON. Well, I do not know fully the facts. I believe Doctor White informed me to-day that he had asked for such an appropriation, but it had been cut out.

Mr. SMYSER. Yes; they took it by the nape of the neck.

Mr. BARCHFELD. Have you a pathologist in connection with your institution?

Doctor RICHARDSON. Yes, sir; they have and have had for the last ten years at least.

Mr. BARCHFELD. You hold autopsies?

Doctor RICHARDSON. Yes, sir; in every case that we possibly can. Of course we have to get the consent of the friends first, if there are any.

Mr. BARCHFELD. You hold them as soon after death as you can?

Doctor RICHARDSON. As soon as we can, because, as has been stated, the results of the autopsies are more valuable the sooner they are held. Of course we make sure that the patient is dead before we hold them.

Mr. BARCHFELD. You make your analyses of all your cases?

Doctor RICHARDSON. Yes, sir; in every case that comes into the hospital they are given a primary physical examination and mental examination.

Mr. BARCHFELD. Do you make a blood test in some cases?

Doctor RICHARDSON. Yes, where we think it is indicated.

Mr. BARCHFELD. Do you make an examination of the sputum?

Doctor RICHARDSON. Where cases expectorate we examine the sputum, and in other cases, where we suspect tuberculosis, we make an examination. We have a camp for tubercular cases during the summer months.

Mr. BARCHFELD. Have you hydrotherapy installed in your institution?

Doctor RICHARDSON. Yes, sir.

Mr. BARCHFELD. And electrotherapy?

Doctor RICHARDSON. We have, a very fine one, but we do not use electro-therapy to any extent.

Mr. BARCHFELD. What is the opinion of advanced alienists on the subject of hydrotherapy?

Doctor RICHARDSON. It is considered, I think, to be practically indispensable in the modern care of the insane.

Mr. BARCHFELD. The patients like it, do they not?

Doctor RICHARDSON. The patients almost uniformly like it—it is pleasant and stimulating—except that the agitated cases do not like anything; but even they, as a rule, come to like it in time.

Mr. BARCHFELD. You said you were interne at—

Doctor RICHARDSON. Assistant physician at the Columbus State Hospital.

Mr. BARCHFELD. But you were interne at St. Elizabeth's?

Doctor RICHARDSON. Yes, sir; I was interne there for about three months.

Mr. BARCHFELD. You know Doctor White?

Doctor RICHARDSON. Yes, sir. He was superintendent for about six weeks at the time I was there.

Mr. BARCHFELD. What is his reputation among the alienists of this country?

Doctor RICHARDSON. As far as I have been able to learn, it is very excellent. I have always heard him spoken very highly of.

Mr. BARCHFELD. He is not only a writer, but an author?

Doctor RICHARDSON. Yes, sir.

Mr. BARCHFELD. And a lecturer?

Doctor RICHARDSON. Yes, sir.

Mr. SMYSER. Doctor, do you have many complaints at Columbus from the friends of patients, as to their treatment?

Doctor RICHARDSON. Yes, sir; we do have them.

Mr. SMYSER. I thought maybe that was confined to St. Elizabeth's, and that it had not reached Ohio.

Doctor RICHARDSON. I think I receive just as many there as assistant as I did here as interne.

Mr. SMYSER. So we are made of the same kind of stuff out there that they are over here?

Doctor RICHARDSON. I think so, as far as complaints are concerned. I think they are just as numerous there.

Mr. SMYSER. I suppose, of course, you investigate them?

Doctor RICHARDSON. Yes, sir; we do. We make every effort to sift them to the bottom.

Mr. SMYSER. Doctor, is it not universally true in all such institutions that there is a tendency and a disposition to manage them most humanely—for the benefit of the patients?

Doctor RICHARDSON. As far as I have been able to see it is; yes, sir. I have been in a great number of institutions and I have found that true universally.

Mr. SMYSER. Criticism you have got to meet the world over?

Doctor RICHARDSON. Yes, sir.

Mr. SMYSER. And complaint. In the face of that you go on and do the best you can, and humanely, too, do you not?

Doctor RICHARDSON. Yes, sir; at least, it is so wherever I have been, personally.

Mr. SMYSER. It will happen occasionally that you have an attendant maltreat a patient?

Doctor RICHARDSON. Yes, sir; I have seen it happen, and in every such case the attendant has been discharged when we were satisfied that there had been any brutality.

The CHAIRMAN. Who gets the benefit of the doubt?

Doctor RICHARDSON. Well, I should say the patients get the benefit of the doubt, where there is any real marked doubt, for this reason: The discipline of the institution must be maintained, and if we had any reasonable doubt, if we were in any decided doubt as to whether the patient has been abused or not, we usually give the patient the benefit of the doubt—but it has to be a decided doubt.

The CHAIRMAN. Of course; in other words, you do not want to do an injustice to the attendant, and discharge an attendant, unless you are perfectly satisfied that there has been some improper conduct?

Doctor RICHARDSON. Yes.

The CHAIRMAN. Do you think from your experience in your own institution, and your experience in St. Elizabeth's, that more care could be exercised than is exercised to prevent anything like cruelty or harsh treatment to patients in St. Elizabeth's?

Doctor RICHARDSON. I think not.

The CHAIRMAN. What do you think in regard to the entertainment of patients that is done in St. Elizabeth's? Do you think that feature is up to the standard?

Doctor RICHARDSON. Well, of course I have not inquired into that since I have been here this time, but I remember when I was there as an interne, and during my residence there, I thought the entertainments were about what they should be. Of course those things can be amplified to a great degree, but I thought they were sufficient. They had a weekly dance there, and sometimes two a week; and if they did not have a dance for the second entertainment they usually had some other kind of entertainment. And they had their band concerts.

The CHAIRMAN. Who composed the band over there at St. Elizabeth's?

Doctor RICHARDSON. When I was there the band was played entirely by employees. It was composed of employees. I suppose that could be amplified, no doubt. I do not suppose there is an institution in the country where the entertainments could not be increased.

The CHAIRMAN. You think that probably now that we have got an appropriation of \$75,000 for the erection of an amusement hall, that will be very beneficial to St. Elizabeth's?

Doctor RICHARDSON. I think so. The amusement hall there is very inadequate; it was when I was there.

The CHAIRMAN. It is really the general dining room, is it not? Do they not use that hall for the general dining room?

Doctor RICHARDSON. The hall there is no larger than the one we have in Columbus, and they have a greater number of people, and it is not favorably situated. It is situated in a place where it is very dangerous from the standpoint of fire.

The CHAIRMAN. Since Doctor White came to St. Elizabeth's there have been new regulations made, have there not, providing for the protection of patients against fire? Do you know anything about that?

Doctor RICHARDSON. I do not. That has been done, I think, since I left.

The CHAIRMAN. Have there not been some changes? Did you not notice when you went over there the other day some changes relative to moving the feeble patients from upstairs, taking them downstairs, and things of that kind?

Doctor RICHARDSON. Yes, sir; the bedridden patients are mostly on the lower floor, and such things as that. That is true.

The CHAIRMAN. The special intention of a change of that kind would be to protect the patients from fire, would it not?

Doctor RICHARDSON. I think so. That is done by most institutions, I think, now. I notice that it prevails largely throughout the institution.

Mr. SMYSER. The superintendency of one of these great institutions is a business operation like the management of a great business concern, is it not?

Doctor RICHARDSON. Yes, sir.

Mr. SMYSER. And is it your judgment that generally, including St. Elizabeth's, the superintendents endeavor to operate these institutions with that same business judgment and capacity that a business manager would his business?

Doctor RICHARDSON. I think so. As far as I have been officially connected with institutions I have found it to be so.

Mr. SMYSER. You have got to be economical, because you go up against Congress and the legislature, and so on?

Doctor RICHARDSON. One has to be careful about the kind of a financial record he makes. I know it is so in our State particularly, because the finances are watched very closely there, and everything in the way of extravagance is visited upon the superintendent very strongly.

The CHAIRMAN. Would you like to have more actual attendants in your institution?

Doctor RICHARDSON. I think we could use more. We only have about 120 attendants for 1,600 patients.

The CHAIRMAN. How many employees have you besides the attendants and nurses—people who come in actual contact with patients?

Doctor RICHARDSON. There are about 120 nurses and attendants, and also there are about 225 employees.

The CHAIRMAN. So you have about 105 employees outside of nurses and attendants?

Doctor RICHARDSON. Yes, sir.

The CHAIRMAN. And you have 1,600 patients?

Doctor RICHARDSON. Yes, sir.

The CHAIRMAN. Are your buildings extensive in area? Do they cover a good deal of ground?

Doctor RICHARDSON. No; all of our patients are in one large building, on the so-called Kirkbride plan, similar to the old building here. We have two cottages now, one containing 105 patients, and the other about 60 patients.

The CHAIRMAN. Of course the more cottages you have the more expense there is for attendants and general assistants?

Doctor RICHARDSON. I think so.

The CHAIRMAN. But you think the cottage plan is beneficial for the patients?

Doctor RICHARDSON. It is the much better plan in every respect. While, as I say, we could use more nurses, we get along fairly well as it is; but I can see where we could use more nurses if we were permitted to have them.

The CHAIRMAN. How do the hours that your attendants and nurses have compare with those at St. Elizabeth's?

Doctor RICHARDSON. At Columbus the nurses arise at a quarter to 5. They go on duty at 5 o'clock and go off duty at 8 o'clock, except that every other night they go off duty at 6.30. Then we have a half day every week, an afternoon every week, and on the front wards our nurses get every third Sunday. On the back wards, the more disturbed wards, they get every second Sunday. Then they get a vacation of a week every six months.

The CHAIRMAN. So that if anything your attendants and nurses have longer hours than they have out at St. Elizabeth's?

Doctor RICHARDSON. Yes, sir; they have, I think, without any question, from what I remember and have heard.

Mr. WALLACE. Do they go out onto the grounds and do work—the attendants?

Doctor RICHARDSON. Some of our attendants, a few of the male attendants, take the workmen out, gangs of workmen on the farm; patients that do work. There are several attendants on the male side; I presume, all told, about half a dozen that do that kind of work.

Mr. WALLACE. Do they do any work themselves?

Doctor RICHARDSON. The attendants?

Mr. WALLACE. The attendants. When they are out in that way do they work or do they just manage those who do work?

Doctor RICHARDSON. Occasionally you can get an attendant who will work along with the patients, but it is not often. I think as a rule the attendants oversee, and the patients do the work. It is only occasionally that you can get a man who will do both, oversee the patients and work with them.

Mr. WALLACE. Is there any special duty that these attendants do out in the yards, cleaning up the yards, or anything of that sort?

Doctor RICHARDSON. No, sir; our cleaning up in the yards is done by a man. He has a gang of patients with him, but he has control of them. We have a special man for that work. They help to cut the lawns under the guidance of a man who is appointed for that purpose, an outside employee, and they do such things as that. We have a gang that is kept busy most of the time at that work.

The CHAIRMAN. What do you think about the comparison of the clothing at your institution and at the Government hospital?

Doctor RICHARDSON. I would say that it averaged up pretty well. Of course, a good many of the men here are in uniform, and that makes it hard to compare the clothing with our civilian clothing, but it will average up fairly well with ours, except where the clothing is furnished by friends. The friends of patients are allowed to furnish, if they wish, clothing that is better than that furnished by the State; but, comparing the State patients with the patients here clothed by the Government, I should say there is very little to choose—very little difference.

The CHAIRMAN. On the whole, you think both institutions are pretty well run?

Doctor RICHARDSON. I think so; yes, sir.

Mr. SMYSER. Especially the hospital at Columbus?

Doctor RICHARDSON. Yes, sir.

Mr. SMYSER. I want that on the record.

#### TESTIMONY OF DR. GEORGE A. ZELLER.

Dr. GEORGE A. ZELLER, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Where do you reside?

Doctor ZELLER. At Peoria, Ill.

The CHAIRMAN. Are you superintendent of an institution there?

Doctor ZELLER. I am superintendent of the Illinois Asylum for the Incurable Insane.

The CHAIRMAN. Is that a State institution?

Doctor ZELLER. It is a State institution, the newest of the State institutions.

The CHAIRMAN. The appropriations are made by the State of Illinois for the entire cost and maintenance of the institution?

Doctor ZELLER. Entirely.

The CHAIRMAN. Have you pay patients there?

Doctor ZELLER. I never have accepted pay from any patient since the institution has been going. There is a provision in the Illinois law which allows voluntary pay to the State, but no one ever thinks of offering the State pay for any patient in any State institution, nor would we accept it



The CHAIRMAN. How many patients are there?

Doctor ZELLER. We have 1,800 patients—1,650 at present.

The CHAIRMAN. How are they divided as between men and women?

Doctor ZELLER. The sexes are about evenly divided.

The CHAIRMAN. How many buildings have you?

Doctor ZELLER. We have 26 buildings.

The CHAIRMAN. Are they about the same size?

Doctor ZELLER. Well, we have two kinds of cottages. We have cottages for 60 and cottages for 120.

The CHAIRMAN. When was this institution established?

Doctor ZELLER. It was opened for patients in February, 1902. It was established ten years ago—the buildings, etc.

The CHAIRMAN. And the institution having recently been built, I suppose you have the very newest appliances that are known to science in the care of the insane?

Doctor ZELLER. Yes, sir.

The CHAIRMAN. In those buildings?

Doctor ZELLER. Our architect made extensive tours through the East, and spent considerable time at the Government asylum here at Washington. We have incorporated some of the plans of that institution by the river.

The CHAIRMAN. Science in the care of the insane, like everything else, is advancing, is it not?

Doctor ZELLER. That is the idea, sir. In the conduct of our institution we look forward entirely. We had no tradition to govern us, and consequently we took up what we thought was new.

The CHAIRMAN. What is the cost per capita?

Doctor ZELLER. One hundred and thirty dollars a year net.

The CHAIRMAN. Does that include the entire maintenance?

Doctor ZELLER. That includes the entire maintenance of the patients, except clothing. In Illinois we are compensated for the clothing that comes back to us. That is why I say it cost the State \$130 net.

The CHAIRMAN. You know the system over in St. Elizabeth's, do you not?

Doctor ZELLER. I believe they furnish everything to the patients—the clothing and everything.

The CHAIRMAN. If you charged up everything in the same manner they do at St. Elizabeth's what would be the cost, approximately?

Doctor ZELLER. I can say that a fair clothing allowance is \$12 to \$14 per patient a year. I would base it on something like what a soldier is allowed. They would not need as much, perhaps, as soldiers. In an asylum they would not require nearly the clothing allowance of a soldier in the field or in barracks, where the soldier must keep spick and span for inspection. I think our clothing bill for the past year of \$9 per capita was rather low, but we contributed to that economy by making a great many of those.

The CHAIRMAN. That is, the patients are employed?

Doctor ZELLER. Yes, sir; we have a power machine, and a large number of patients are employed, largely in the domestic department.

The CHAIRMAN. What character of patients do you have?

Doctor ZELLER. We have the worst class of patients that can be found in the 9,000 insane of Illinois. Our institution is the dumping ground for the other institutions.

The CHAIRMAN. But what is their class?

Mr. BARCHFELD. They are incurables.

Doctor ZELLER. They are the class that other superintendents choose to send us.

The CHAIRMAN. Do you mean to say that the other institutions of Illinois can send you patients whom you are obliged to receive?

Doctor ZELLER. Yes, sir. I made a protest about that until it rang all over the State, but they still do it. I have received a message just now: "Will you take 100 patients from Dunning?" Dunning is the Chicago Insane Asylum. I will answer that: "Send them along." When I get that 100 patients they will be the pick of 1,600 insane, and undesirability will be the determining factor in selecting them. [Laughter.]

The CHAIRMAN. Is there any particular charter connected with your institution that makes it necessary for you to accept undesirable people from the other insane asylums in the State of Illinois?

Mr. BARCHFELD. His is an asylum for incurables.

Doctor ZELLER. My asylum is called the Illinois Asylum for the Incurable Insane. There is no law defining incurability in Illinois. It is up to the superintendents.

The CHAIRMAN. Do you not have any acute cases at all?

Doctor ZELLER. I get a great many acute cases, but if a superintendent has decided that an acute case is incurable I get him just the same.

The CHAIRMAN. And there is not any appeal from his decision?

Doctor ZELLER. I make a protest, and they get good, big headlines occasionally in the papers. I appeal to the State board of charities, and they generally sustain the other superintendents.

The CHAIRMAN. Do the newspapers generally jump on your institution?

Doctor ZELLER. They do not. They stand by me. They are very generous. But please understand me. My institution was built to take from the almshouses of Illinois an accumulated number of incurable insane which had been transferred from the insane asylums to these almshouses. If I were to take those strictly I would get a very nice class of old, demented, quiet patients; but the congestion being so great in the other institutions the State board of charities has ruled in many instances that these other asylums may send their patients to us direct. In the case of Dunning, the Chicago Insane Asylum, with its 1,800 inmates, that is a county asylum. They are strictly within the law when they send these undesirable patients, because it is not a State institution, and I am simply relieving Chicago of its burden and taking its quota. They are strictly within the law. In the last bulletin of the State board of charities I had a protest against being used by Dunning. They sent me 200 patients, and among them were 50 of the filthy class, 50 epileptics, 50 violent patients, and very few desirables.

The CHAIRMAN. Is there a preponderance of senile cases in your institution?

Doctor ZELLER. Yes; naturally. The average age is much higher than in the other institutions. The average age of patients is 68 years there.

The CHAIRMAN. Does the care of these senile patients involve more expense or less expense than the care of others?

Doctor ZELLER. It would involve more, for the reason that they are more helpless and less able to help themselves. Our number in the hospital is greater than would be the case in a similar number of normal insane people.

The CHAIRMAN. Are there many senile cases over in St. Elizabeth's?

Doctor ZELLER. With 2,500 insane I should judge they would have quite a number. They have no place to transfer them, and they are the residual residents after deaths and transfers, and naturally, in time, there would be quite a number of decrepit and aged people.

The CHAIRMAN. How many attendants and nurses have you in proportion to the number of patients?

Doctor ZELLER. About one to nine.

The CHAIRMAN. In your opinion have you all the attendants and nurses that are necessary?

Doctor ZELLER. Yes, sir; I have free choice to select more if I wish them.

The CHAIRMAN. Have you?

Doctor ZELLER. No one limits me in the number of attendants.

The CHAIRMAN. They limit you in the appropriation, do they not?

Doctor ZELLER. We have an unexpended balance of \$30,000 available all the time, so that I would have no excuse.

The CHAIRMAN. Do you mean that you have an expended balance left over from the appropriation of the previous year?

Doctor ZELLER. Yes, sir.

The CHAIRMAN. How do you get them to appropriate so much ahead?

Doctor ZELLER. We go to the legislature and say "The capacity of the institution is 1,500 patients," and we ask for an appropriation of \$140 per capita for 1,500 patients. We do not use the \$140 per capita, and the difference between what we use and what we obtain represents our surplus.

The CHAIRMAN. And it is cumulative, and you can use that the next year?

Doctor ZELLER. Oh, yes.

The CHAIRMAN. You do not have to cover it back into the treasury of the State of Illinois?

Doctor ZELLER. No, but the legislature will finally take notice of it and it will make an allowance, and deduct it from the amount appropriated at some future time.

Mr. SMYSER. They will call you to account, in other words, a little further along?

Doctor ZELLER. They will say "The institution should have \$200,000 next year, but it has \$30,000; therefore we will appropriate \$170,000 and that with the \$30,000 will make up the \$200,000." So eventually it does reach the treasury, and sometime it is turned in. The 30th of June closes our fiscal year.

The CHAIRMAN. Are you the superintendent of the hospital in its administrative as well as in its medical department?

Doctor ZELLER. In every way.

The CHAIRMAN. Do you approve of that?

Doctor ZELLER. I do, most emphatically. I do not think there is any argument in favor of a division of authority. I believe in dividing the responsibility, and we do. My chief clerk, who corresponds to the steward in the Ohio hospitals and the New York hospitals—

The CHAIRMAN. Do you appoint all the people under you?

Doctor ZELLER. Oh, no; the board of trustees do the appointing of officers.

The CHAIRMAN. How about the attendants and nurses?

Doctor ZELLER. They are appointed absolutely by the superintendent.

The CHAIRMAN. The way the board of trustees appoint is that you make a recommendation that somebody should be appointed, and they appoint them. Is that not so?

Doctor ZELLER. At present they have a civil service commission in Illinois, and all appointments henceforth will be through the civil service commission.

The CHAIRMAN. That is, as far as clerical work is concerned?

Doctor ZELLER. As far as everyone in the institution is concerned, except in three positions. Those are the superintendent, the private secretary of the superintendent, and the chief clerk. Those are exempted, but every other place in the institution is subject to the civil service commission.

The CHAIRMAN. Will they hold a mental examination for positions like those of nurse and attendant?

Doctor ZELLER. They have held them.

The CHAIRMAN. Do you approve of that?

Doctor ZELLER. Yes, sir; I am quite in favor of the test.

The CHAIRMAN. Do they have a local board at the institution?

Doctor ZELLER. No, sir; the State board comes to the different institutions, and they are notified in advance that there will be an examination. They examined eighty in my institution recently. Many of them were on duty. Up to the present time it is somewhat like what I heard you say yesterday—that the Civil Service Commission for the minor positions is a board of registration; but it aims to furnish, if possible, a large available list of employees of every kind and description.

The CHAIRMAN. What pay do your attendants and nurses get?

Doctor ZELLER. Every attendant in the institution gets \$20—every woman. That is the attendant's pay. They get promotions to higher positions.

The CHAIRMAN. Do you mean that when they first begin they get \$20?

Doctor ZELLER. We have a ninety-day service for \$18, but that is simply preliminary.

The CHAIRMAN. How high do their salaries go?

Doctor ZELLER. That is the limit of the pay of an attendant. The higher pay depends upon the promotion. One girl in every five gets a higher position. Each cottage has a head attendant.

The CHAIRMAN. What does she get?

Doctor ZELLER. Twenty-five dollars. Then we have general night watches, supervisors, and so forth. The corps of graduate nurses get \$30 apiece, the supervisors get \$40, the matron gets \$50; and all these people are chosen from this mass of attendants.

The CHAIRMAN. Do you have female attendants altogether?

Doctor ZELLER. I have one ward that is in the hands of men.

Mr. HAY. Only one ward?

Doctor ZELLER. One cottage.

The CHAIRMAN. You have female attendants altogether, do you?

Doctor ZELLER. Yes, sir; over 600—nearly 700—of my men are in the care of women attendants.

Mr. HAY. How does that operate?

Doctor ZELLER. Splendidly.

The CHAIRMAN. Do these women manage the greatly disturbed patients with facility?

Doctor ZELLER. No, sir; we have one cottage for the violent insane, and those who are destructive. When a patient manifests a violent disposition he is transferred there immediately.

The CHAIRMAN. How many are there in this cottage for the violent insane?

Doctor ZELLER. About 130.

The CHAIRMAN. And how many men are there to attend to them?

Doctor ZELLER. About 6.

The CHAIRMAN. Does that include the day and night attendants?

Doctor ZELLER. No; when I speak of the number of attendants I mean those on duty—6.

The CHAIRMAN. I meant how many do you have to manage the 130 patients altogether.

Doctor ZELLER. During the twenty-four hours?

The CHAIRMAN. Yes.

Doctor ZELLER. Six for one shift, 6 for another—that is 12. We have 16 men.

The CHAIRMAN. What are their hours?

Doctor ZELLER. Strictly eight hours for everybody; everybody in the institution.

The CHAIRMAN. How do you arrange that, Doctor?

Doctor ZELLER. That is arranged on this basis. I found that a ward with say 4 attendants had in reality only 2, because every other evening half of the attendants, in every insane asylum that I know anything about, are off for two hours. Every one of those attendants gets half a day off each week. Now, a ward with 4 attendants has this afternoon only 3 because 1 is gone. If I am not correct some of the other superintendents can correct me. Then that ward instead of having 4 attendants has for about two hours only 2 attendants, and very frequently, in many institutions, that ward of 4 attendants has only 2 at mealtime, because 2 of the attendants leave and take their meals in advance of the patients eating. That leaves the ward in charge of 2 attendants. So I figured that if that ward could be with 2 attendants only during the mealtime, if it could be with 2 attendants four afternoons of each week, if it could be with 2 attendants for a couple of hours each evening, why not make it just 2 attendants for eight hours, and then bring on a fresh, rested corps for the next eight hours, and then turn it over to the night watch for the other eight hours. I have the day divided into three shifts; my attendants are not overtaxed, and the spirit of the labor law of the United States is strictly carried out.

The CHAIRMAN. How much vacation do your attendants get?

Doctor ZELLER. Fourteen days a year.

The CHAIRMAN. Do they get any Sundays off or holidays besides that?

Doctor ZELLER. They do not. They get sixteen hours of every day off.

The CHAIRMAN. I understand that. I mean do they get any Sundays off besides. They are entitled to fourteen days vacation are they?

Doctor ZELLER. Yes; it is annual.

The CHAIRMAN. And beyond that they are on duty eight hours out of every twenty-four hours?

Doctor ZELLER. Yes, sir; but the girl that is on duty this Sunday in the forenoon will have the entire forenoon of next Sunday. It alternates so that they are only on duty a——

The CHAIRMAN. How do you shift them? Do you make dog watches as they do at sea?

Doctor ZELLER. Very much on that order. They leave the main central building, and the schedule is posted each evening by the supervisor, and every girl knows where she has been assigned for the next day, and they report duty.

Mr. BARCHFELD. After the expiration of their eight hours are they permitted to leave the grounds?

Doctor ZELLER. They are under our supervision after that time. In giving this concession we have made them surrender up the balance of their time, although we are very liberal in the matter.

The CHAIRMAN. They have to have direct permission before they can leave the grounds?

Dr. ZELLER. If they do not want to stay out later than 10 o'clock p. m., it requires no permission. They may leave the grounds.

The CHAIRMAN. But suppose they go on at noon and go off duty at 8 o'clock in the evening. They can then leave the grounds, but they have to come in at 10 o'clock?

Doctor ZELLER. Yes, sir; that is the regular arrangement. Of course we give them what is called a "late," when they have until midnight to come back, once a week.

The CHAIRMAN. If the sixteen hours when they are off duty happen to come in the nighttime, can they go off and stay off all night?

Doctor ZELLER. Never; under no circumstances. We could not keep our force in hand were we to allow that.

The CHAIRMAN. So that the eight hours really means that during the eight hours they actually are performing their duties——

Doctor ZELLER. Yes, sir.

The CHAIRMAN. But it does not give them any greater liberty in regard to going outside of the grounds than obtains with the attendants at other institutions?

Doctor ZELLER. Yes; I think it does. We never refuse them permission to leave the grounds.

The CHAIRMAN. I am merely saying that it does not give them any greater liberty, entirely apart from the question of whether you refuse or grant. They will get permission just exactly as they do in other institutions. Is that not so?

Doctor ZELLER. During the time they are off duty, well, I would say yes, that they are expected to secure permission.

Mr. BARCHFELD. How do the employees like the eight-hour system?

Doctor ZELLER. Well, they are not especially in love with it. I can not say that they look upon it with any great favor.

Mr. HAY. Does this rule obtain through all of the institutions of your State?

Doctor ZELLER. No; in no other than ours.

The CHAIRMAN. Has it been done voluntarily by you?

Doctor ZELLER. Entirely.

The CHAIRMAN. There is no law on that subject?

Doctor ZELLER. There is no law on that subject whatever. This is the only institution in the State in which it obtains.

The CHAIRMAN. You approve of it?

Doctor ZELLER. I do most heartily. I have heard the song of the overworked attendant, I have heard about the long hours of duty, so that I was glad to reduce it to the eight hours, which the Government employees in this building and in all the Departments have, and then I was entirely free to ask from those attendants that they apply themselves thoroughly for the eight hours they were on duty.

Mr. BARCHFELD. You practically get as much service in the eight hours as an ordinary man would give in ten or twelve hours?

Doctor ZELLER. Fully. I realized that while they were on duty for twelve or fifteen hours they would not be actively on duty.

Mr. SMYSER. While they are on for eight hours can these attendants go to their meals, or do they have to wait until the eight hours are up?

Doctor ZELLER. They do not go to meals.

Mr. SMYSER. They just swallow a bite when they can get it. Is that it?

Doctor ZELLER. Oh, no; we have a splendid employees' mess.

Mr. SMYSER. But here is an attendant who goes on, say at 6 o'clock in the morning.

Doctor ZELLER. Yes, sir.

Mr. SMYSER. And he will go off at 2 o'clock?

Doctor ZELLER. No. If you will permit me to explain the 8-hour system with us, all the watches change at 6 o'clock a. m. They serve until 10. These people have had their breakfast before 6 o'clock. They serve until 10 and they are then relieved at the end of four hours by another shift which stays on until 2. Then the morning shift takes another tour of duty of four hours. There is a break of four hours in the service. The attendants are on four hours, off four hours, on four hours, and off twelve hours, always. It is that long wait between meals that prevented my giving a straight eight hours, which I still hope to do.

The CHAIRMAN. You say you still hope to have them work eight hours consecutively without any meal in that time?

Doctor ZELLER. Yes, sir.

The CHAIRMAN. Where do your attendants live?

Doctor ZELLER. They live in an excellent employees' building, perhaps the finest in the United States—a very, very fine building indeed.

The CHAIRMAN. Did you go into the nurses' home at St. Elizabeth's?

Doctor ZELLER. I saw it.

The CHAIRMAN. What did you think of that building?

Doctor ZELLER. It is a very fine building. If ours is superior, it is simply because more money was spent on it and it is new. That is all. But there is no criticism to be made on the Government quarters over at the asylum.

The CHAIRMAN. What do you think of the new buildings over at the hospital now?

Doctor ZELLER. I think they are splendid.

Mr. SMYSER. Do you separate in this institution the male and female attendants?

Doctor ZELLER. A wall runs straight through the building, separating the males and females, but we have long since passed that, and we have them on both sides. There are six sections in the building, and five of them are occupied by the women and one by the men. But the women do not enter by the same door nor come out by the same stairways. There are bathing and toilet facilities that are absolutely separate and distinct. They are simply there side by side.

Mr. HAY. What kind of restraint do you use?

Doctor ZELLER. Absolutely no restraint of any kind.

The CHAIRMAN. Did you hear this testimony about this man Gartrell yesterday?

Doctor ZELLER. I did.

The CHAIRMAN. Could such a thing as that have happened in your institution?

Doctor ZELLER. Could it? We have some very ugly patients in our institution, and where we have those men we have, as I said, a very strong force of attendants. That man would not have been likely to have caught one of my attendants unawares, as he did this young man at the Government hospital.

The CHAIRMAN. Do you think that the restraint, consisting of two men holding a patient, is more humane than to put a camisole on the patient?

Doctor ZELLER. I do.

The CHAIRMAN. Why?

Doctor ZELLER. I think that mechanical restraint is an abomination. The tendency of the times is to break away from it and to discontinue it.

The CHAIRMAN. Your attendants frequently have to hold patients, do they not?

Doctor ZELLER. They do, for a very short time. They soothe them and talk to them and stroke their heads. They are very gentle with them. Patients are amenable to kindly influences. It does not require nearly the amount of manual efforts to hold a patient you would think.

The CHAIRMAN. Have you ever had occasion to have a patient attacked at your institution?

Doctor ZELLER. I had a patient murdered by attendants.

The CHAIRMAN. An attendant murdered by a patient you mean?

Doctor ZELLER. No; I had a patient murdered by the attendants, and they claimed that it was done in self-defense.

The CHAIRMAN. What happened to the attendants?

Doctor ZELLER. They were thrown in jail without bail, and the subsequent grand jury failed to indict them, but the man was killed in the encounter.

The CHAIRMAN. How did that happen, Doctor, from your investigation? When did it happen, first?

Doctor ZELLER. It happened about three years ago. It was unnecessary. We held that that killing was unnecessary.

The CHAIRMAN. How was it done?

Doctor ZELLER. It was done by resistance. The man was ugly, and I have no doubt he had tantalized those men.

The CHAIRMAN. I do not understand you. You say a man was ugly. Do you mean that the patient was ugly?

Doctor ZELLER. Yes, sir; he was a man who had this disposition that we heard described here yesterday, and he found a couple of men



of the same disposition, and there was a fight. Then came that feeling as to who is going to be boss, and in the end the two men won.

The CHAIRMAN. Put yourself in their place. What would you have done when the patient attacked you?

Doctor ZELLER. I would have gotten out of his way.

The CHAIRMAN. Suppose you were up in a corner of the room and you could not get out of his way?

Doctor ZELLER. I would not be in a corner of a room alone in an insane asylum with vicious patients. That is not supposed to happen. We have men.

The CHAIRMAN. Do you always have sufficient attendants to watch every maniacal patient?

Doctor ZELLER. We aim to place those patients where there is an ample force.

Mr. HAY. When you say you do not use any restraint do you mean that you do not use restraint of any character?

Doctor ZELLER. Of no character, whatever.

Mr. HAY. Do you use drugs?

Doctor ZELLER. We never use the hypodermic syringe on the wards. We never use mechanical or medicinal restraints.

Mr. HAY. Do you use the pack?

Doctor ZELLER. We use baths. We have a tub on wheels, with slats, and we lay the patient on there, and the patient can be lowered in the water and raised up and put back in bed.

The CHAIRMAN. Of course that can not be used for a man who is greatly disturbed. A man would not lie on those slats to be lowered gently, would he, and then raised and put over on his bed?

Doctor ZELLER. No; it would be difficult to hold such a patient in the water.

Mr. HAY. You take them, do you, in the grounds?

Doctor ZELLER. The patients?

Mr. HAY. Yes, sir.

Doctor ZELLER. They have a very great amount of freedom.

Mr. HAY. But I mean if a man is excited or disturbed?

Doctor ZELLER. You mean to walk them?

Mr. HAY. Yes.

Doctor ZELLER. Yes, sir.

Mr. HAY. Suppose he will not go?

Doctor ZELLER. Then they let him sit.

Mr. HAY. They just let him alone?

Doctor ZELLER. They let him alone. Nonresistance is the theory with us.

The CHAIRMAN. But, Doctor, take a patient who murderously attacks an attendant. You state that if you had been in the attendant's place you would have gotten out of his way?

Doctor ZELLER. I certainly would.

The CHAIRMAN. But you can not stop there. The man is going somewhere. What happens? How do they get hold of the patient again?

Doctor ZELLER. Well, there is help there; plenty of help.

The CHAIRMAN. But somebody has got to seize this patient? That must be done?

Doctor ZELLER. They will try in every way to stop him.

The CHAIRMAN. They do not say "Please stop," do they?

Doctor ZELLER. They will call out to the patient, "Sit down there; here." They will talk to him and take hold of him and control him.

The CHAIRMAN. But do they not have to use a certain amount of force to control a maniacal patient? Suppose you have a man in the wildness of delirium tremens, outside; you have got to hold onto him to keep him from doing either himself or somebody an injury?

Doctor ZELLER. Yes, sir.

The CHAIRMAN. If a man, instead of having delirium tremens, has maniacal instincts, does not somebody have to control that man?

Doctor ZELLER. Yes, sir; that would be done by more than one attendant though.

The CHAIRMAN. Does it not injure the patient just as much to have two attendants holding unto him, with the natural instincts that we all have of self-protection, as it would to put on a restraint like a camisole?

Doctor ZELLER. No, sir; for the reason that by the time you are ready to put the camisole on you have him subdued, and hence it is not necessary to put it on. You can not put a camisole on a fighting patient. It is a question of getting his arms into the sleeves and lacing. You have to have him subdued before you can do that.

Mr. HAY. Do you think the putting on of the camisole will hurt the patient?

Doctor ZELLER. I certainly do. It restricts the bodily movements and the respiration.

Mr. HAY. Does this course of nonrestraint obtain in all the institutions in your State?

Doctor ZELLER. In Illinois?

Mr. HAY. Yes, sir.

Doctor ZELLER. No, sir; but there is a strict law in Illinois which provides when mechanical restraint can be applied. It is provided that it must be recorded. There must be a restraint book kept in every institution, accessible to the public. I think I have that law here. I will see.

The CHAIRMAN. How frequently have you had difficulty with disturbed patients?

Doctor ZELLER. Very rarely, Mr. Chairman.

Mr. HAY. I would like to see that law if you have it.

The CHAIRMAN. How many physicians have you on your staff?

Doctor ZELLER. I have four, and I had sent for another before I left home. I have four assistant physicians.

The CHAIRMAN. Have you had many escapes from your institution?

Doctor ZELLER. We have very few escapes. We had no escapes up to the quarter ending March 31. We have had a few escapes during this present warm weather. We had nine escapes during the year 1905—successful escapes.

The CHAIRMAN. You mean where you did not get the people back?

Doctor ZELLER. Yes, sir—nine in 1905.

The CHAIRMAN. Do you know how many they have had in St. Elizabeth's?

Doctor ZELLER. I do not remember. Their report shows it. I have studied the reports of most of the institutions in this country, and they have quite as many as we have. It has not made any difference in the number of escapes. I notice that they have quite as many in a closely-locked institution.

The CHAIRMAN. Do you lock your wards?

Doctor ZELLER. No, sir.

The CHAIRMAN. You do not?

Doctor ZELLER. No, sir.

The CHAIRMAN. The doors of the wards are not locked?

Doctor ZELLER. The doors are not locked and the windows are unguarded.

The CHAIRMAN. And yet you say you only have one attendant to nine patients?

Doctor ZELLER. That is all; about that; yes, sir.

The CHAIRMAN. How long have you been treating insane people?

Doctor ZELLER. Well, I have been actively in charge of this institution since 1902. I was superintendent as early as 1898, but the institution did not open. I was away out of the country.

The CHAIRMAN. Had you had experience with insane institutions before that?

Doctor ZELLER. No, sir; only such as I obtained from a study of the subject, from time to time, preparing myself. I was the superintendent, appointed by the governor, a long time before the institution was opened, and pending its completion I was away. It was opened, but I did not get home quite in time for the opening, but I have been continuously the superintendent since October, 1902.

The CHAIRMAN. You were in the Army, at Manila, as a surgeon connected with the Army?

Doctor ZELLER. I was a volunteer surgeon, yes, sir; about three years.

Mr. BARCHFELD. How many unsuccessful escapes have you had?

Doctor ZELLER. We have had quite a number of unsuccessful escapes. We think nothing of an escape. We do not worry about an escape. If somebody wanders down the hill or off of the grounds there is no fuss. Somebody checks them up and says such and such a patient is missing. Then the hue and cry is raised and we go out and look for him, and in most instances probably he will be brought in in a reasonable time.

Mr. BARCHFELD. What do the friends of the patient think of that?

Doctor ZELLER. The friends of the patient are our inspiration in all this. They are the people who are sustaining us in this. They like it.

The CHAIRMAN. When you find patients who seek to injure themselves by picking out their eyes and striking themselves and jabbing things into themselves, and things of that kind, what do you do with them?

Doctor ZELLER. There is very little of that now. We have a patient who was forty-five years in an almshouse who plucked out both eyes in her madness. She has been with us a couple of years now.

The CHAIRMAN. Did she pluck out her eyes in the almshouse or after she came to you?

Doctor ZELLER. She did it in the almshouse.

The CHAIRMAN. That is what you call suicidal mania, is it not? What do you do with them?

Doctor ZELLER. Yes; you might call that suicidal.

The CHAIRMAN. What do you do?

Doctor ZELLER. We watch them, and stop them directly at the time before it goes very far. These people are under constant observation.

The moment we find such a patient doing something that might lead to worse consequences she is stopped at once. Her attention is called to it and she stops. Weapons they can not obtain with us.

The CHAIRMAN. She stops the moment you tell her not to do it?

Doctor ZELLER. Yes.

The CHAIRMAN. Do your patients obey when you tell them that?

Doctor ZELLER. My attendants have very nice control over the patients—very nice control. They are on pretty good terms with them.

The CHAIRMAN. Take a ward that holds 30 people—

Doctor ZELLER. We have no such ward.

The CHAIRMAN. What would the ward hold?

Doctor ZELLER. Sixty is our smallest ward.

The CHAIRMAN. How many attendants do you have on that ward at one time watching those 60 people?

Doctor ZELLER. Two.

The CHAIRMAN. Do you mean to say that such absolute surveillance can be had by two attendants over 60 patients as to prevent either attacks by patients on attendants or injuries by patients to themselves?

Doctor ZELLER. I have selected a typical ward of selected patients when I speak of the two attendants. They have been classified so perfectly that one could do it. Those patients are generally on their good behavior—that sort of patients.

The CHAIRMAN. Then take a case where a ward contains patients who are not on their good behavior.

Doctor ZELLER. Then we have more attendants.

The CHAIRMAN. How many patients would you have in a ward of that kind?

Doctor ZELLER. We would have 60.

The CHAIRMAN. And how many attendants would you have there?

Doctor ZELLER. Probably we would have 5 on such a ward.

The CHAIRMAN. Let me ask you, then, the question in this way. Granted a ward of disturbed patients, with 60 patients in it, watched by 5 attendants; can you prevent attacks by patients on each other or on attendants, or injuries by patients to themselves, with that force?

Doctor ZELLER. It keeps the girls very busy in certain wards. Four hours is a long tour for such girls. They are on the go; they are constantly among them.

Mr. HAY. As a matter of fact, do you have many cases where they do make attacks on each other or on the attendants, or try to kill or hurt themselves?

Doctor ZELLER. We have a pretty ugly cottage of women.

Mr. SMYSER. Doctor, I see on page 11 of your report, you say: "We have a woman who choked two women to death."

Doctor ZELLER. Yes, sir; we still have her.

Mr. SMYSER (continuing). "And a man who inflicted a fatal bite upon another, and subsequently he killed two women with a fire poker."

Doctor ZELLER. Yes; we still have him. I remember him very well.

The CHAIRMAN. Do you not think that could have been prevented if they had been restrained?

Doctor ZELLER. In both cases these things happened in the almshouse before they came to us.

Mr. HAY. You say these things happened —

Doctor ZELLER. In the almshouse. I am citing there the character of the patients that are brought to us.

Mr. HAY. It did not happen in your institution?

Doctor ZELLER. No, sir; these people were brought to us after these things had happened.

Mr. HAY. Have they hurt anybody since they have been with you?

Doctor ZELLER. Yes, sir; that man bit a man's nose off.

Mr. SMYSER. I see on page 11 in your report you say, after stating the character of the inmates, and saying that many of them were aged and feeble, and that some had spent more than forty years in almshouses, and that a number were blind, while loss of limb or complete imbecility were quite common: "I have visited and carefully inspected every hospital for the care of the insane in Illinois, as well as numerous almshouses, and I failed to find anywhere a ward which in violence or distraction equaled the 58 women in cottage No. 4, group B. We have with us many homicides, two of whom are lifetime convicts."

Doctor ZELLER. Yes, sir.

Mr. SMYSER. And then comes what I read before: "We have a woman who choked two women to death." But that did not happen in your institution, you say.

Doctor ZELLER. Oh, no, sir.

Mr. HAY. Referring to that man who bit somebody's nose off, if you had put him in mechanical restraint, would that have prevented him biting the nose off?

Doctor ZELLER. No, sir.

Mr. HAY. He would do it in an excess of fury?

Doctor ZELLER. It is a mania with him. He is kept under very close watch now. It is perhaps eighteen months ago that he did that. We had a conversation as to the advisability of drawing the man's teeth, but I could not bring myself to think that the pulling of his teeth would be excused in the light of modern ideas in the care of the insane, and the teeth were not extracted. We will take a chance on him not doing it again.

Mr. HAY. Will you have to keep him restrained all the time in order to prevent an accident of that kind?

Doctor ZELLER. You would have to keep him away from noses.

Mr. HAY. What I want to get at is as to whether or not keeping a person in restraint—a person who has that sort of mania—would prevent him from doing something of that sort or whether it could be prevented in any other way than by keeping him in constant restraint?

Doctor ZELLER. I think that the application of restraint can prevent certain occurrences in an institution.

Mr. HAY. Well, you did permit an occurrence of that kind.

Doctor ZELLER. In that particular case; but that is a very rare occurrence. It is a very rare case; so rare that I spoke of it in the biennial report. It is not the restraint that I fear in an institution. It is the abuse of restraints, the misuse of restraints, is what I fear, and that is why I cut it out absolutely. There can be no abuse of anything when it is not tolerated at all.

Mr. HAY. What sort of inspection do you have?

Doctor ZELLER. We have pretty constant inspection. We are always on the go, irregularly. What I mean is, as Doctor Eyman said, not

to see the wards certainly every week, but the superintendent is in and out all the time.

Mr. HAY. I mean outside inspection.

Doctor ZELLER. Oh, you mean over us?

Mr. HAY. Yes.

Doctor ZELLER. We have a State board of charities. In the first place, we have our trustees, three of them, who are directly responsible to the governor. Over them is the State board of charities.

Mr. HAY. Do they come around at any time?

Doctor ZELLER. Any time. Miss Julia Lathrop, of Rockford and Hull House, has inspected my institution during my absence. She is one of the foremost women in the United States in this line of work. She has been there during my absence, and she saw the conditions as they are. The governor of Illinois was in my institution six weeks ago. He came up the hill unannounced, at night, and went through the institution. He has been there three times in the last year.

Mr. HAY. What do you think of that?

Doctor ZELLER. I think it is proper. I think it is a little bit severe. One might be misjudged sometimes by a very temporary condition, but after all an institution is generally able to stand on its appearance, on its daily routine life. It has to do that finally, or it can not stand at all.

The CHAIRMAN. Have you ever had any complaints made by friends of patients, or by the patients themselves, in regard to ill-treatment?

Doctor ZELLER. Yes, sir; and we always aim to remedy that.

The CHAIRMAN. Do you think complaints of that kind are almost certain to occur in any institution for the care of the insane?

Doctor ZELLER. They are; and I think that they are very frequently grounded on something real.

The CHAIRMAN. What do you do if you find that an attendant has ill-treated a patient?

Doctor ZELLER. I correct it every time.

The CHAIRMAN. Do you mean that you discharge the attendant?

Doctor ZELLER. Oh, no; not necessarily. It may be merely insufficient clothing—

The CHAIRMAN. No; I am talking about cruelty.

Doctor ZELLER. Oh, brutality?

The CHAIRMAN. Yes.

Doctor ZELLER. We have no more complaints of brutality now.

The CHAIRMAN. Of course, this man who killed the patient was discharged, and you had him arrested and committed, and then, you say, the grand jury failed to indict him?

Doctor ZELLER. Yes, sir.

Mr. SMYSER. What is wrong with the grand jury?

Doctor ZELLER. Well, they felt that it was a struggle for life or death between two elements and that there was a lack of evidence.

The CHAIRMAN. Did you believe that the attendants had actually murdered this man?

Doctor ZELLER. I always took the stand that the killing was unnecessary; that it could have been avoided.

The CHAIRMAN. Were you in the institution at the time it took place?

Doctor ZELLER. I was. I was present at the man's bedside when

he died, and I relieved the men from duty instantly and called the coroner.

The CHAIRMAN. Were the men hurt—the attendants?

Doctor ZELLER. No, sir; not perceptibly—not visibly.

The CHAIRMAN. How did they kill him?

Doctor ZELLER. They got him down. They got their knees on his chest, and cracked his ribs and contused his inner organs.

Mr. SMYSER. The old Charles Reade method?

Doctor ZELLER. Yes; in Very Hard Cash.

Mr. SMYSER. Doctor, I see on page 12, under the heading "Curtailments of restraint"—

Doctor ZELLER. That is 2 years old, that report. I beg your pardon, but please remember that that report is 2 years old.

Mr. SMYSER. Just a moment. "Mechanical restraint has been reduced to the minimum, and all leather apparatus has been discarded except in a few periodical violent inmates on the male side." At the time of this writing you did have some sort of restraint?

Doctor ZELLER. Certainly. We have not abolished the restraint so very long—absolutely abolished it.

Mr. SMYSER. How recently?

Doctor ZELLER. On the 25th of September, 1905. That was the day the final order was issued against the use of restraint in our institution. It is not so far back. There had been a progressive movement toward its elimination, and it was made final on that day.

Mr. SMYSER. So that your report for the year past will not have any such language as that?

Doctor ZELLER. No, sir. The quarterly reports of the board of charities call attention to the abolition of restraint in successive issues.

Mr. SMYSER. Doctor, from what you have observed, is it your judgment that the tendency of the times is in all of these institutions to reduce mechanical restraints to the minimum?

Doctor ZELLER. Yes, sir; I have visited institutions on this trip out here, where there is absolutely no restraint used.

Mr. SMYSER. And in other institutions where there is some mechanical restraint resorted to as yet, do you think the tendency is to diminish the mechanical restraint?

Doctor ZELLER. I have noticed that tendency throughout the testimony that I have heard in this particular.

Mr. HAY. What institutions are those that do not have any restraint? You say you have seen some.

Dr. ZELLER. The institution at Catonsville and at Sykesville, Md. Neither of them use restraints, and Sykesville also has no bars.

The CHAIRMAN. Do you have any protection at the windows except the window panes?

Dr. ZELLER. None whatever, only the window panes. The window is weighted, and can be raised and lowered by a child.

The CHAIRMAN. Do you have an exterior patrol? Is the place patrolled exteriorly?

Doctor ZELLER. They are thoroughly patrolled, day and night.

The CHAIRMAN. How many night watchmen have you to patrol them?

Doctor ZELLER. We have a very large force of night watchmen. Every cottage has a night watch, and there is a general night watch.

Then there are at least three assistant general night watches. They are constantly patrolling.

The CHAIRMAN. How much do these men get paid?

Doctor ZELLER. The general night watch gets \$40; the assistant general night watch get \$30 each. One is a woman, who gets a head attendant's pay, \$25.

The CHAIRMAN. Are you able to get all the attendants you want?

Doctor ZELLER. Yes, sir; I would say that I am. Sometimes we are a little short. We are putting it on a civil service basis, and of course these examinations have to be made, and some of the girls are a little timid about presenting themselves, but in a general way I would say that we are able to get a sufficient force.

The CHAIRMAN. Do you find that the women attendants have difficulty in controlling their people?

Doctor ZELLER. No, sir.

The CHAIRMAN. You prefer the women attendants to male attendants, do you not, for male patients?

Doctor ZELLER. I certainly do. I regard them as better.

The CHAIRMAN. Why, Doctor?

Doctor ZELLER. They are better housekeepers. Then we have again the restoration of a homelike atmosphere in the cottage—the presence of woman about the house. That is a condition. We have then the approval and the gratitude of the visiting friends and relatives of the patients, who universally approve of it. In the hospitals, in the care of the sick, where we have trained nurses, there can be no question of the superiority of their care.

The CHAIRMAN. I am talking about insane patients, not about hospitals.

Doctor ZELLER. I beg your pardon. I was speaking of our own hospitals for the sick insane.

Mr. SMYSER. Have your buildings two stories?

Doctor ZELLER. Yes, sir.

Mr. SMYSER. Take a 2-story building; do you have separate rooms for the patients?

Doctor ZELLER. We have dormitories for them at night.

Mr. SMYSER. And no sort of guard over the windows?

Doctor ZELLER. Nothing whatever.

Mr. SMYSER. What would there be to prevent a patient suddenly throwing himself out of a second-story window?

Doctor ZELLER. Nothing, nothing at all; but he does not do it.

Mr. SMYSER. Well, he has not done it yet, but if you do strike a fellow who has that sort of tendency, there would be nothing to prevent him doing it, would there?

Doctor ZELLER. No, sir; except that we have a few patients on the first floor of each cottage. If we knew of any such disposition it is probable that that patient would be quartered on the first floor. It has happened, however, since you bring the subject up. We have had patients escape from a second-story window, and we have had them injured, but not fatally, however.

Mr. SMYSER. I had more particularly in mind a patient who had suicidal tendencies, for instance.

Doctor ZELLER. We have never had a suicide in our institution up to the present time.



Mr. SMYSER. Perhaps you do not have so many acute cases where such a condition might occur. Is that it?

Doctor ZELLER. Well, we have what you would find among 1,700 insane people.

Mr. SMYSER. Out of the 1,700, and of the males, how many of them, in your judgment, are under the age of 35?

Doctor ZELLER. Oh, not many. Out of, say, 900 there would be perhaps 300. Not over one-third would be under 35.

Mr. BARCHFELD. Have you a pathologist at your institution?

Doctor ZELLER. No, sir; we are just beginning to equip our pathological department.

Mr. BARCHFELD. You do not make any analyses, then—

Doctor ZELLER. As I say, we are getting ready now to organize or equip a thorough pathological department. We have microscopes and blood-counting apparatus, and things of that sort, but we are going to take up pathology more thoroughly.

Mr. BARCHFELD. Do you have post-mortems?

Doctor ZELLER. Up to the present time we have not been holding post-mortems. We have not been prepared to take care of the refuse.

Mr. BARCHFELD. It is in accordance with the advance that is being made to hold post-mortems in all cases where it is possible?

Doctor ZELLER. Yes, sir. The pathological laboratory is one of the essential things in all public institutions at the present time. Each institution should furnish its quota of information on this subject.

Mr. BARCHFELD. Do you have any hydrotherapeutic apparatus?

Doctor ZELLER. Only to a limited degree. We want to put in an apparatus, and that is one of the objects of my present trip east. I have been through the eastern institutions and have seen those very complete and thorough equipments in the Columbus State Hospital and the McLane Hospital at Boston.

Mr. BARCHFELD. Have you any electric apparatus?

Doctor ZELLER. No; we have not. We are just getting ready to do that.

Mr. BARCHFELD. You saw the way Doctor White keeps his records over there?

Doctor ZELLER. I saw the record room.

Mr. BARCHFELD. How do you like that?

Doctor ZELLER. It is very fine and complete.

Mr. BARCHFELD. Do you have any such records at your institution?

Doctor ZELLER. We have not. That is one of the things I want to do also.

Mr. BARCHFELD. From what you saw at St. Elizabeth's, what do you think of the institution?

Doctor ZELLER. I have no criticism to pass on it. I think it is a splendidly equipped institution.

Mr. BARCHFELD. What do you know of Doctor White?

Doctor ZELLER. I know of Doctor White by reputation; that he is a very able man in his field of work.

Mr. HAY. Doctor, how far are you from Peoria?

Doctor ZELLER. Five miles.

Mr. HAY. Do you have any complaints from the citizens of Peoria about leaving your windows open?

Doctor ZELLER. I never had any complaint, but there had been

complaints made. It had been said that the neighbors were complaining, but when it was investigated we could find no one in the neighborhood who was not heartily in favor of the methods we were pursuing.

Mr. HAY. How is the food out there, doctor? How do you feed the patients? Have you a general kitchen?

Doctor ZELLER. We have a very fine general kitchen; said to be the largest and finest kitchen in the world.

Mr. HAY. How do you serve the food, hot?

Doctor ZELLER. Hot.

Mr. HAY. How do you do that?

Doctor ZELLER. We do it with a horse and wagon and driver, and send it quickly in bulk.

Mr. HAY. Do you mean to say that you haul the food from the general kitchen to the different wards?

Doctor ZELLER. To the cottages; yes, sir.

The CHAIRMAN. What kind of vessels do you carry the food in?

Doctor ZELLER. In containers, cans.

The CHAIRMAN. Is there any heat in them when you put them in the wagon?

Doctor ZELLER. No, except their own heat, which is considerable.

The CHAIRMAN. And can you transport that food from one general kitchen to these several cottages, and keep it warm in cold weather?

Doctor ZELLER. In bulk; yes, sir. It is served fairly warm.

The CHAIRMAN. Do you have steam tables in the dining rooms where you serve it?

Doctor ZELLER. No, sir; the food is served as soon as it is brought to the cottages. It is served quickly by a large force, and then they are called to eat. However, I am just getting the asbestos warmers that are so successfully in operation at Dayton, Ohio, and which Doctor Eyman spoke of. That is a very excellent method of preserving the heat in food.

Mr. HAY. Did you see any of the food at St. Elizabeth's?

Doctor ZELLER. I saw the table set.

Mr. HAY. How does it compare—

Doctor ZELLER. I thought their service was very fine. I thought their table service was to be commended. Their dishes were nice, and the food seemed very palatable and sufficiently varied. I do not question but that the food supply is good.

The CHAIRMAN. Doctor, if you were asked to make some suggestions as to the improvement of conditions at St. Elizabeth's, what would you say?

Doctor ZELLER. Mr. Chairman, I was only superficially through St. Elizabeth's. Doctor Clark was very kind and showed me through the various departments. I even went through the negro quarters, but I was there more to find things for me to copy rather than things to condemn in them, so I saw nothing to condemn, except from my standpoint the very first thing that greets the eye is repulsive, and that is the stockade behind which the patients are kept. It is a very high board fence with barbed wire on top of it. That I would remove.

The CHAIRMAN. Do you mean the fence surrounding the entire grounds?

Doctor ZELLER. No, sir.

The CHAIRMAN. You mean the bull pen?

Doctor ZELLER. The bull pen; yes, sir.

The CHAIRMAN. Do you not think it is rather an attractive place inside?

Doctor ZELLER. I do.

The CHAIRMAN. It is a park, is it not?

Doctor ZELLER. It is beautiful; but I do not think that "bull pen" adds anything to the attractiveness of it.

The CHAIRMAN. Can you not understand it is safe to have some patients in a comparatively small inclosure, where it would not be safe to give them the run of the whole grounds?

Doctor ZELLER. In my State we are supplied with a sufficient amount of help to guard these people.

Mr. SMYSER. Do you have your grounds inclosed?

Doctor ZELLER. No, sir.

Mr. SMYSER. How do you patrol them; by pickets?

Doctor ZELLER. No; our people stay around the cottages on the porches. They do not wander around promiscuously over the hills and in the neighborhood. We have certain parole patients, many of them, but they come back. If you go down to the interurban station adjoining my grounds, you will find many patients hanging around talking, but they will come back. They have parole cards in their pockets; but the others, the unparoled patients, are on the porches and in various places within easy reach of the attendants.

Mr. HAY. I started to ask you how the food at your institution compares with the food out here?

Doctor ZELLER. I did not study their food that close, but I should say that their food supply is certainly as good as ours, and ours is based a great deal on the army ration, on the necessary components to constitute a healthy and nutritious ration. That is what we base our food supply on. It is sufficiently varied and properly prepared to make it palatable and nutritious.

Mr. HAY. Doctor, did you find that law that you spoke of?

Doctor ZELLER. I can find it; yes, sir. It is the restraint law of Illinois.

Mr. HAY. How do you amuse your patients?

Doctor ZELLER. We amuse them very much as has been stated here. We lack an amusement hall. We have improvised one out of our dining room; but the previous superintendents have outlined the character of the amusements, only most of them are better equipped and have a larger hall. We pick up wandering minstrels—it might be a bagpiper, it might be an elocutionist or possibly a moving-picture affair. Then we have very fine phonographs or graphophones that pass from ward to ward, with many records. We have fifty or sixty, and we get new records for them right along.

Mr. HAY. How much experience did you have in the Army?

Doctor ZELLER. I was in the Army three years.

Mr. HAY. Do you think there is anything in a soldier or sailor that makes him harder to control than an ordinary citizen when he becomes insane?

Doctor ZELLER. I have been on commissions that have tried soldiers and found them insane. I would say, by reason of the discipline of the soldier, that he should be as easy to manage in the State institution as any other citizen. It seems to me that all of his training would lead in that direction. We have insane soldiers, many of

them, in our institution—volunteers. We even have one who became insane in the Philippines.

Mr. HAY. Do you use oleomargarine?

Doctor ZELLER. We use butterine. We buy it as butterine, we pay for it as butterine, and we serve it as butterine.

Mr. HAY. How does it work?

Doctor ZELLER. Very satisfactorily. There is no law in Illinois against it, and there is no fraud perpetrated in its purchase by institutions. All the institutions, with one exception, in Illinois use butterine. There is an institution at Elgin, which is in the heart of the butter and dairy district, that uses butter.

Mr. SMYSER. It would create a riot if they undertook to use anything else? [Laughter.]

Doctor ZELLER. A superintendent has already expressed the situation exactly.

Mr. SMYSER. I suppose you have been advised of the fact that out at St. Elizabeth's they use oleomargarine?

Doctor ZELLER. No; I have not.

Mr. SMYSER. Well, they do. Is the institution, so far as the dietary is concerned, subject to criticism by reason of that fact?

Doctor ZELLER. Not at all. I do not suppose that St. Elizabeth's claim to be using butter while they are using butterine? That is no criticism on an institution, because butterine is manufactured, it is tolerated, and its sale is prescribed by—

Mr. SMYSER. The Federal Government?

Doctor ZELLER. By the Federal Government, and if it were injurious the Government would step in and protect the insane or anybody else from imposition.

Mr. HAY. As a matter of fact, it is a wholesome food?

Doctor ZELLER. It is presumed to be a nutritious food.

Mr. WALLACE. Are there not different grades of butterine, Doctor?

Doctor ZELLER. There are grades of butterine. Butterine runs 9 cents, 11 cents, and 12 cents.

Mr. HAY. Is there any difference between oleomargarine and butterine?

Doctor ZELLER. I do not know. I am not posted as to that. I know it is butterine that we use, but I really do not know if there is a distinction.

There is that law pertaining to mechanical restraint [producing paper].

Mr. HAY. What do you think as to the size of this institution? Do you think an institution ought to be large or small, Doctor?

Doctor ZELLER. I never saw an institution that I thought was too large.

Mr. HAY. You have not?

Doctor ZELLER. Never.

Mr. HAY. You think a large institution can be controlled just as well as a small one?

Doctor ZELLER. Yes; just the same as a big hotel, or a big house can be controlled as well as a small one.

Mr. BARCHFELD. What is your salary, Doctor?

Doctor ZELLER. Three thousand five hundred dollars a year.

Mr. BARCHFELD. Have you carriages?

Doctor ZELLER. We have the necessary horses about our institution to conduct the institution. Our equipment of conveyances is not very elaborate. It is sufficient, however, to carry on the work. We have no closed carriages.

Mr. BARCHFELD. Have you any automobiles?

Doctor ZELLER. No, sir; the State of Illinois has no automobiles. It had one for the commission at St. Louis during the World's Fair. Since that was mentioned no one had the temerity to buy an automobile out of the public funds of Illinois.

Mr. HAY. Doctor, I will just keep this section of the Revised Statutes, if you have no objection.

Doctor ZELLER. That is all right. I just copied it from the statutes. It is a correct transcript of the statutes of Illinois.

Mr. BARCHFELD. Let it be copied in the record.

The section of the Revised Statutes referred to is as follows:

Revised Statutes, Chapter 85, section 21:

No patient shall be placed in restraint or seclusion in any hospital or asylum for the insane of the State except by order of the physician in charge. All such orders shall be entered upon a record kept for that purpose, which shall show the reason for the order in each case and which shall be subject to inspection by the State commissioners of public charities, and such records shall at all times be open to public inspection.

Mr. HAY. Doctor, has the State of Illinois a separate place for the care of epileptics?

Doctor ZELLER. It has not. That is one of the things the coming legislature is expected to provide.

Mr. HAY. Do you have any in your institution?

Doctor ZELLER. We have many in our institution. I will submit one of our daily reports.

Mr. HAY. How do you treat them?

Doctor ZELLER. We treat them in separate cottages. They are treated dietetically, and in every other way, with reference to the epilepsy rather than the insanity.

Mr. HAY. You give them a different diet than you do others?

Doctor ZELLER. Yes; I placed a physician in charge and told him to study everything that bears on the disease of epilepsy and treat those men accordingly.

Mr. HAY. You have a man in charge of that?

Doctor ZELLER. Yes, sir.

Mr. HAY. How many have you in your institution.

Doctor ZELLER. I had only four when I left, although we are getting two more. I have a pathologist.

Mr. SMYER. He means epileptics.

Mr. HAY. How many epileptics?

Doctor ZELLER. We have about 125 epileptics in the institution, about 65 of each sex, or something like that.

Mr. HAY. How many criminal insane have you?

Doctor ZELLER. Criminal insane or insane criminals?

Mr. SMYER. That is a distinction without a difference to us.

Doctor ZELLER. There can be no criminal insane person. An insane person can not commit a crime.

Mr. HAY. How many insane criminals have you—people who have been convicted of crime?

Doctor ZELLER. I have a number of ex-convicts in the institution.

Mr. HAY. How do you treat them? Are they in a separate place?

Doctor ZELLER. These convicts I speak of have the absolute freedom of the grounds. They have demonstrated their trustworthiness. They had probably become trustees before they left the penitentiary. Two of them are murderers; one of them is a hold-up man.

Mr. HAY. You have no separate institution there in the State of Illinois for them?

Doctor ZELLER. We have an institution for the criminal insane in Illinois—for the insane criminals. It contains less than 200 inmates. It is an annex of the Southern Illinois Penitentiary, but before it was built we had many of them.

Mr. HAY. How many institutions for the insane have you in the State of Illinois?

Doctor ZELLER. We have seven institutions for the insane. Counting the asylum at Lincoln, the number is eight, and they are all given here with their population. We have 9,000 under State care, legally committed insane.

Mr. HAY. Is there anything else, Doctor, you care to say?

Doctor ZELLER. Nothing else, thank you.

#### TESTIMONY OF EARNEST YANCEY.

EARNEST YANCEY, having been duly sworn, was examined and testified as follows:

The ACTING CHAIRMAN (Mr. SMYSER). What is your name?

Mr. YANCEY. Earnest Yancey.

The ACTING CHAIRMAN. Are you an employee out at St. Elizabeth's.

Mr. YANCEY. Yes, sir.

The ACTING CHAIRMAN. How long have you been there?

Mr. YANCEY. I have been there nine months and twenty days.

The ACTING CHAIRMAN. How old are you?

Mr. YANCEY. Twenty-five.

The ACTING CHAIRMAN. Do you know anything about this Gartrell business? Were you present? Did you see any part of it?

Mr. YANCEY. Of which?

The ACTING CHAIRMAN. Were you present? Did you see any part of it?

Mr. YANCEY. No, sir; I was not present.

The ACTING CHAIRMAN. When did you learn of it?

Mr. YANCEY. Well, I was on day duty.

The ACTING CHAIRMAN. When did you learn of it?

Mr. YANCEY. I heard of it next morning.

The ACTING CHAIRMAN. What time?

Mr. YANCEY. Six o'clock.

The ACTING CHAIRMAN. Are you on duty in that ward?

Mr. YANCEY. Yes, sir.

The ACTING CHAIRMAN. How is this man Gartrell? How has he been; violent or otherwise?

Mr. YANCEY. Yes, sir; a very violent patient.

The ACTING CHAIRMAN. Did you ever have any trouble with him?

Mr. YANCEY. No, sir; I never have myself.

The ACTING CHAIRMAN. Did you see him have trouble with other attendants or patients?

Mr. YANCEY. Well, yes, sir.

The ACTING CHAIRMAN. This particular trouble you know nothing about?

Mr. YANCEY. No, sir; I do not.

The ACTING CHAIRMAN. What time did you see him after the trouble?

Mr. YANCEY. I seen him about half past 8 in the morning.

Mr. HAY. Mr. Yancey, Mr. George B. Gartrell stated here the other day that you told him this man had been beaten up by Mr Cowhig and Mr. Thorne. Just state what you told him.

Mr. YANCEY. I told Mr. Gartrell that the night attendants had trouble with him, and before they could conquer him they thought had bruised him up some.

Mr. HAY. Where did you get your information?

Mr. YANCEY. Mr. Cowhig told me. He was on night duty. I did not see Mr. Thorne that morning.

The ACTING CHAIRMAN. Mr. Cowhig told you they had had trouble with him and had bruised him up some?

Mr. YANCEY. Yes, sir. He was asleep, resting, when I come on duty.

The ACTING CHAIRMAN. Is that all you told Mr. George B. Gartrell?

Mr. YANCEY. Yes, sir; that is all I told him.

Mr. HAY. Did anybody say to you that you ought not talk to him?

Mr. YANCEY. Sir?

Mr. HAY. I think Mr. Gartrell said, or somebody said, that some other attendant or supervisor told you you talked too much.

Mr. YANCEY. No, sir; no one ever told me that I talked too much.

The ACTING CHAIRMAN. About this incident?

Mr. YANCEY. No, sir.

The ACTING CHAIRMAN. Or that the less you said about it the better?

Mr. YANCEY. No, sir.

The ACTING CHAIRMAN. Did anything of that kind occur?

Mr. YANCEY. No, sir; I never heard anything of it.

Mr. HAY. Do you know of any other case of anybody being hurt there by any attendant?

Mr. YANCEY. No, sir; I do not. Mr. Bannon, an attendant over there, I guess he knows more than I do about Gartrell.

Mr. HAY. Why? Because he has been under his immediate supervision?

Mr. YANCEY. Yes, sir.

Mr. HAY. Is he a man you had to look after all the time, constantly?

Mr. YANCEY. Yes, sir; when he was on the ward you had to look after him all the time—watch him very closely?

Mr. HAY. Were you told to do that?

Mr. YANCEY. Yes, sir.

Mr. WALLACE. Do you know anything about a difficulty that occurred Saturday a week ago, when a man by the name of Carlson was beaten up or abused?

Mr. YANCEY. Carlson? No, sir.

Mr. WALLACE. The 16th day of this month?

Mr. YANCEY. No, sir; I do not.

Mr. WALLACE. You know nothing of that?

Mr. YANCEY. No, sir.

Mr. WALLACE. Do you know of a patient having been taken to ward B 2 after being abused?

Mr. YANCEY. No, sir.

The committee (at 4.20 o'clock p. m.) adjourned until Thursday, June 28, 1906, at 2 o'clock p. m.

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HOUSE OF REPRESENTATIVES,

*June 28, 1906.*

The committee met at 2 o'clock p. m.

Present: Messrs. Olcott (chairman), Smyser, Barchfeld, Hay, and Wallace.

**TESTIMONY OF WILLIAM BERTRAND ACKER.**

WILLIAM BERTRAND ACKER, having been duly sworn, was examined and testified as follows:

The CHAIRMAN. Have you given your name to the stenographer?

Mr. ACKER. Yes, sir.

The CHAIRMAN. What is your name?

Mr. ACKER. My name is Acker.

The CHAIRMAN. Are you connected with the Interior Department?

Mr. ACKER. Yes, sir.

The CHAIRMAN. What is your position there?

Mr. ACKER. I am chief of the patents and miscellaneous division.

The CHAIRMAN. Does that duty give you any connection in any way with St. Elizabeth's Asylum?

Mr. ACKER. Yes, sir. Among other eleemosynary institutions in the District of Columbia we have charge of the Government Hospital for the Insane.

The CHAIRMAN. What do you do there? What are your duties in connection with the hospital?

Mr. ACKER. The Secretary of the Interior has general supervisory authority over that institution, and all work in the matter of the execution of contracts, the preparation of regulations, and a lot of miscellaneous work in connection with the institution, all passes through this division.

The CHAIRMAN. Do you have anything to do with regard to the appointment of committees of the insane over at St. Elizabeth's who are entitled to pensions?

Mr. ACKER. No, sir; that is done under the court here.

The CHAIRMAN. I mean do you have to scrutinize the accounts of the committees who are appointed, or do you have anything to do with the designation of who shall be appointed as committee?

Mr. ACKER. No, sir.

The CHAIRMAN. Do you know Mr. Fenning?

Mr. ACKER. Yes, sir; I have had the pleasure of meeting him. I know him.

The CHAIRMAN. He has been committee of insane people in a number of cases, has he not?

Mr. ACKER. I understand he has; yes, sir.

Mr. HAY. Do you know Mr. Evans?



Mr. ACKER. George W. Evans?

Mr. HAY. No; Richard P. Evans.

Mr. ACKER. Yes, sir; I am acquainted with Mr. Evans.

Mr. HAY. Does he practice before your Department?

Mr. ACKER. Yes, sir.

Mr. HAY. Did you ever have any conversation with him in regard to the appointment of Mr. Fenning as guardian of these soldiers?

Mr. ACKER. I may have. I do not recall just now.

Mr. HAY. Did you ever express any surprise to him that Doctor White uniformly recommended Mr. Fenning as guardian for these soldiers at the Government Hospital for the Insane?

Mr. ACKER. Now that you recall that, I do recollect that when Mr. Evans spoke to me about that particular case I did express surprise. I had forgotten, in the first instance, that I had originally recommended to Doctor Richardson that it would be a good thing for him to secure the services of somebody in the city here who would be willing to act as guardian for these various soldiers over there who were entitled to pensions. The Doctor could not represent them himself. I think, subsequently, I suggested the same thing to Doctor White.

Mr. HAY. You could not on behalf of the Secretary of the Interior—or could you—authorize Doctor White to make these applications to the court?

Mr. ACKER. No, sir; that is not a portion of his duty as superintendent of the institution.

Mr. HAY. That is not a part of his duties?

Mr. ACKER. No, sir.

Mr. HAY. And for that reason did you ever authorize him, or undertake to authorize him, or have anything to do with advising him to have Mr. Fenning or anybody else appointed as guardian in these cases?

Mr. ACKER. I have just stated that I suggested to him that it would be a good thing for him to do that.

Mr. HAY. You suggested to Doctor White the name of Mr. Fenning?

Mr. ACKER. Oh, no; not at all. That is a matter that rests entirely with the superintendent.

The CHAIRMAN. You mean that you think it is advantageous for one man to be guardian in most of the cases, so as to have one man to deal with?

Mr. ACKER. No, sir; not at all. My idea was that it would be a good thing if the superintendent would get somebody interested who would be willing to serve in that capacity.

Mr. HAY. You mean one man, then, do you not?

Mr. ACKER. Anyone whom the doctor might select, or more than one, if he could get them.

Mr. HAY. As a matter of fact, have you had any complaints against Mr. Fenning?

Mr. ACKER. No, sir.

Mr. HAY. In regard to his conduct in these cases?

Mr. ACKER. No, sir.

Mr. HAY. Do you know of any reason why Mr. Fenning should not continue to be appointed as guardian?

Mr. ACKER. No, sir.

Mr. HAY. Have you ever had any trouble with the superintendent or Mr. Fenning or anyone else in having them turn over to these soldiers their pension certificates?

Mr. ACKER. No complaint has come to the Department that I know of.

Mr. HAY. Have you ever asked Doctor White to turn over to any one of the soldiers there his pension certificate, which Doctor White had previously declined to do?

Mr. ACKER. I do recall one case, one instance of that kind, but the name of the pensioner I do not recall just now.

Mr. HAY. Do you recall the reason for that? Did Doctor White give any reason why he did not turn this pension certificate over to the soldier that you speak of?

Mr. ACKER. I can not recall what the doctor stated to me. I know that in that particular case that I have in mind I called the doctor up over the 'phone and suggested that the certificate be turned over to the party who was entitled thereto, he having been discharged from the institution; but the name of the case, as I just said, I do not recall; there are so many.

Mr. HAY. You do not know anything about the circumstances of the case, as to whether Doctor White was in any way to blame for failing to turn this over to the soldier?

Mr. ACKER. No, sir; I should think the doctor acted as he did out of abundant caution.

Mr. HAY. So you have no complaint to make on that score?

Mr. ACKER. None at all.

#### **ADDITIONAL TESTIMONY OF FREDERICK A. FENNING.**

FREDERICK A. FENNING, having been heretofore sworn, was recalled and testified as follows:

The CHAIRMAN. Mr. Fenning, since you were here before there have been some further proceedings in the matter of the Logue case, have there not?

Mr. FENNING. Yes, sir. I wish to say to the committee that since I have testified, and since Mr. Evans testified, in this Logue case the court has acted on the case during the present week. Justice Stafford has overruled the exceptions to my account filed by Mr. Evans on behalf of Mr. Logue, and has also denied the petition filed by Mr. Evans, which sought to have a former order of the court set aside. The court has also confirmed the report of the auditor which was based on my account. The order of the court confirming the report of the auditor has provided for a final disposition of the estate in accordance with the auditor's report, and I am now taking steps to immediately close the estate.

Mr. EVANS. I would like to remark right here that I have given Mr. Fenning notice that I shall carry that case to the court of appeals.

The CHAIRMAN. Let the record show that.

Mr. WALLACE. I would like to ask Mr. Fenning some questions.

Mr. SMYSER. Let the record show that Mr. Evans intends to appeal.

Mr. FENNING. Let Mr. Evans insert in his remark that he has given me notice since I came into this room, because that is the first notice I have received.

Mr. SMYSER. The only point about that is that this account has been

closed, so far as the court is concerned. He has the right of appeal, I take it?

Mr. EVANS. Yes; and I have given Mr. Fenning notice.

Mr. WALLACE. I would like to ask Mr. Fenning some questions. I will ask you these questions, but first I want to call your attention to the fact that you very glibly here a few days ago pronounced something that Mr. Evans had said, or that his partner had said, as a lie. Do you remember that?

Mr. FENNING. Yes, sir.

Mr. WALLACE. You remember that?

Mr. FENNING. Yes, sir.

Mr. WALLACE. I want to ask you whether that is the way you examine witnesses in court when you appear as a lawyer?

Mr. SMYSER. What is that?

Mr. WALLACE. I want to ask him if that is his style of examining witnesses, with respect to their answers, as he did here as a witness the other day?

Mr. FENNING. My answer to that is that I have for this committee the very greatest respect.

Mr. WALLACE. That is what I wanted to get at.

Mr. FENNING. I have just as much respect for them as I have for any court. Do you want me to go further with that answer?

Mr. WALLACE. Yes, sir.

Mr. FENNING. I would have said the same thing, I think, under the same circumstances, in any court.

Mr. WALLACE. To whom?

Mr. FENNING. I presume you mean in my testimony. The inference is, what would I do if I were testifying in a case. That is what I was doing here, testifying.

Mr. WALLACE. It is your custom in court to call a man a liar, is it?

Mr. FENNING. I have heard it done where the provocation was sufficiently serious.

Mr. WALLACE. Then I will ask you these questions: In the Logue case, about which you have testified, you had to file a petition in the Pension Office to have him restored to the pension rolls, did you not?

Mr. FENNING. My impression is that I did not file a petition or a declaration.

Mr. WALLACE. Who was named as the attorney in this application for the restoration of Mr. Logue's pension, and what fee, if any, did he get through the pension agent for prosecuting this claim?

Mr. FENNING. I will answer that by saying that I did not file the declaration in that case, to the best of my recollection. Had I filed a declaration through an attorney the Pension Office would have allowed him the fee fixed by law, whatever it is; but I am quite clear that I did not file such a declaration.

Mr. WALLACE. Your partner, Mr. Coldren, charged a fee of \$30 in this guardianship case before the court upon the petition filed by Mr. Wilson, did he not?

Mr. FENNING. Yes, sir; and the claim was approved by the court.

Mr. WALLACE. There were no lunacy proceedings in this case, merely the filing of the petition for guardianship by Mr. Wilson, upon which you were appointed committee?

Mr. FENNING. There had been a lunacy proceeding in this case.

Mr. WALLACE. Why did Mr. Coldren charge a larger fee in this case than the record shows he usually does in other cases where there are both lunacy proceedings and the guardianship application?

Mr. FENNING. I presume that the fee in this case was fixed as the fees in all cases are, or nearly all cases, by the size of the estate and the amount of service required.

Mr. WALLACE. Why did you purchase a \$5 hat and several suits of underclothing at \$3 a suit for this old soldier who was confined in the bull pen, and got hats and underclothing furnished by the hospital? Do you consider this proper economy?

Mr. FENNING. I will answer that by saying that to the best of my recollection I furnished him a hat and clothing as the same was needed, but that my practice in such cases is to have the hospital purchase the articles necessary and then send me a memorandum showing that the articles have been furnished. Then the physician in charge of the ward O. K.'s the bill and I make the payment. I presume that the articles were furnished to Logue just as I furnish them for other patients.

Mr. WALLACE. Mr. Logue stated, I believe, in his testimony, that he did not want you for a guardian, and knew nothing about it until long after your appointment, and on page 2383 he says you came to see him once; in your report to the court as committee you state you visited your ward frequently. Which of you have told the truth, or which of you made the correct statement here.

Mr. FENNING. My statement was correct, that I had visited him frequently. I went to see Logue once, and possibly more than once, in the supervisor's office, the little parlor connected with the supervisor's office at that building, and then I saw him several times to my distinct recollection outside of that building. Logue used to loaf on a bench immediately outside of the supervisor's office, and I remember distinctly, on more than one occasion, seeing him there.

Mr. WALLACE. Why did you not, as Mr. Logue's committee, go into court, after the passage of the act of February 20, 1905, and move the court to vacate the order directing the payment of \$5 a month to the hospital instead of leaving this action to be taken by Mr. Logue's attorney, Mr. Evans, and then go into court and oppose it, so as to take the money away from your ward and hand it over to the hospital?

Mr. FENNING. That is a very long question. I wish you would split that up. You have asked me three or four different things in there.

Mr. WALLACE. Then may I take the liberty of handing it to you, and you may answer it as you please?

Mr. FENNING. Now, as to the first part of that inquiry, the order of the court directing the payment of \$5 a month—and, by the way, it was \$5 a week—that order was passed on the petition of the Board of Charities. Their object was to relieve the District of paying for a man who was able to pay for himself. That being the case it was a meritorious debt, so to speak. It was an obligation that the man ought to meet. I did not consider at that time, and I do not consider at all, that it is incumbent upon me as committee to help any man to resist his just obligations. It is perfectly clear why the order of the court was passed. It was passed on the petition of the Board of Charities. That is the reason I did not go in at that time, I suppose. It says here: Why did I go into court and oppose it, so as to take the money away from my ward and hand it over to the hospital? I have never opposed

any proceedings brought by Mr. Evans in this case, but I have wanted it to appear distinctly on the record from the start to the finish that there must be an order of court for everything done.

Mr. WALLACE. In the Corbett case you have testified that the personal effects were sold to Mrs. Corbett's relatives upon their private bids; if so, why was a commission paid to the auctioneer and advertising expenses incurred?

Mr. FENNING. Why, my dear sir, there was not one cent of commission paid to the auctioneers on anything that was sold on private bids in that case. You may examine my account, and you will find that I accepted private bids for as many articles as I could get private bids on; that I submitted those bids to the court and the court authorized me to sell on those bids. The rest of the estate, probably eight-tenths of the whole thing, was sold at public auction and the auctioneer got a commission on what he took in at the public auction, but he did not get a cent, naturally, on what I took in at the private sale.

Mr. WALLACE. Very probably there is not a question here that you would not like to answer.

Mr. FENNING. I would be glad to answer anything you ask me, sir.

Mr. WALLACE. Did you get any rebate from the advertisement and any part of the commission from the auctioneer, or either?

Mr. FENNING. No, sir.

Mr. WALLACE. Were these sales made to Mrs. Corbett's relatives or to Mr. Corbett's relatives?

Mr. FENNING. They were made to the parties who appeared at the residence pursuant to invitations that I gave to every relative of the Corbett's that I could find.

Mr. WALLACE. So you did the best you could in that respect?

Mr. FENNING. I did.

Mr. WALLACE. Did not Mrs. Young and Mrs. Hayden protest to you that you were sacrificing very valuable property for small prices?

Mr. FENNING. They made a good many cantankerous statements and protests. I do not remember the particular one you refer to. I paid such attention to their protests as I thought the protests warranted, and then I did what I thought was my duty.

Mr. WALLACE. Did you make any attempt to separate the personal effects of Miss Corbett, for whom you were not acting as committee, from the effects of Mrs. Corbett?

Mr. FENNING. I did.

Mr. WALLACE. Or did you sell all the personal property in the house indiscriminately?

Mr. FENNING. I did not.

Mr. WALLACE. Your report shows that a good many of the better articles were purchased by one J. Smith. Who was he and who was he representing?

Mr. FENNING. I have no idea who he was. I know that the auctioneers, in accordance with their practice, keep an itemized list of the bidders and purchasers, and how much they paid for all articles. There were a good many dealers present, and he may have been a dealer.

Mr. WALLACE. Do you know where this Mr. J. Smith can be found?

Mr. FENNING. No, sir; but I will say this—

Mr. WALLACE. Do you know anything about his residence?

Mr. FENNING. I do not know a thing about the J. Smith that you refer to, but the sale was conducted by Wilson & Mayers, who are very reputable auctioneers here, and they tell me that they knew practically all the dealers who appeared and bid. If it is necessary to get in touch with him I have no doubt you can do so through Wilson & Mayers.

Mr. WALLACE. Is it a fact that Mrs. Corbett did have an interest in her husband's estate, and that this is not an insane delusion on her part?

Mr. FENNING. Every woman has an interest in her husband's estate, I take it.

Mr. SMYSER. Too much, sometimes.

Mr. FENNING. I have answered that very fully, Judge, in my testimony in chief.

Mr. WALLACE. What I want to get at is did she really think she had it, or was it a delusion, and she did not have it? Do you think that was a delusion on her part, and that nothing of that kind existed? That is her idea of it?

Mr. FENNING. At the time Mr. Corbett died certainly she had an interest in his estate, if he had an estate of any value.

Mr. WALLACE. In the George Bastin case, when Superintendent White sent you his certificate under oath certifying that Bastin had recovered his mind and was sane, why did you not file that report and move for his restoration to his legal rights as a sane person, instead of compelling Mr. Bastin to employ counsel for that purpose?

Mr. FENNING. In the first place, Doctor White did not send me a certificate under oath that the man had recovered his mind. He is required by statute to send a certificate of that sort to the clerk of the court, and if he sent any certificate I suppose he sent it there.

Mr. WALLACE. If so, it did not come into your hands?

Mr. FENNING. No, sir.

Mr. WALLACE. After Mr. Bastin was declared to be sane by the court and restored to his legal status, why did you have him reexamined by two physicians of your selection, namely, Doctor Hummer, of the hospital, and Doctor Nevitt, your brother-in-law?

Mr. FENNING. Will you let me see that a minute?

Mr. WALLACE. Certainly.

Mr. FENNING. I did not have him reexamined by two physicians after he had been declared sane by the court.

Mr. WALLACE. Why did you, then, pay them a fee of \$25 each out of your ward's money, instead of the usual fee of \$10?

Mr. FENNING. I have answered that. I did not have him examined after he had been declared sane by the court. That was your question. Now, then, I did have him examined at the time he was seeking to have the court declare him sane, and I exhibited here the other day the order of the equity judge directing and authorizing such examination.

Mr. SMYSER. Did we not have all that the other day?

Mr. FENNING. We had every bit of it, and I exhibited the original order.

Mr. WALLACE. You think we had every bit of this?

Mr. SMYSER. Sure. He told us about the examination pending the proceeding to have him discharged, and then the subsequent allowance of a fee for this examination, unless I was dreaming.

Mr. FENNING. That is the same case.

Mr. WALLACE. I would not want to go over the same ground at all, but I thought probably there was something that had not been touched on.

Mr. FENNING. Ask Mr. Evans if I did not testify to all that the other day.

Mr. EVANS. He testified on the same subject, but I do not think he answered any of the questions that Mr. Wallace is putting to him now.

Mr. FENNING. Mr. Evans was not here the second day, when I testified about the Bastin case.

Mr. EVANS. But I have read the testimony.

The CHAIRMAN. All right, Mr. Wallace, go ahead.

Mr. WALLACE. What do you say? Shall I ask them?

Mr. BARCHFELD. Oh, go ahead; wind it up in a blaze of glory.

Mr. WALLACE. Why did you, then, pay them a fee of \$25 each out of your ward's money, instead of the usual fee of \$10 each?

Mr. FENNING. I explained that the other day by saying that that was considered as an examination entirely different from the usual examination.

Mr. WALLACE. Yes.

Mr. FENNING. Justice Anderson decided that \$25 would be a fair compensation, and in his own handwriting he added to the order that the physicians should be paid not exceeding \$25 each. Your question contains a suggestion that one of the physicians was Doctor Nevitt, and you described him as my brother-in-law. Is that right?

Mr. WALLACE. Yes.

Mr. FENNING. That is not quite correct. Doctor Nevitt's wife and my wife are sisters, and that is the only relationship, if it consists of any relationship, between us.

Mr. WALLACE. We will leave the law to settle that. Doctor Hummer has already testified that he made no charge of a \$25 fee in this case, but that you volunteered it. Why did you do this instead of paying the customary fee of \$10?

Mr. FENNING. My recollection is that after the court fixed the charge, when I told the physicians to make the examination I told them the rate the court fixed. If the court had not inserted that amount in the order it was my intention to have the physicians suggest their own charge and then take the charge into court for approval.

Mr. WALLACE. Mr. Bastin's attorney, Mr. Croxdale, has testified, in volume 20, that you gave him a pretty stiff fight in relation to the payment of Mr. Bastin's money. He means a legal fight, I suppose. Why did you do this and put Bastin, your ward, to the unnecessary expense of employing counsel to compel you to do what you should have done voluntarily?

Mr. FENNING. No one of my wards has been obliged to employ an attorney to get me to do what I should have done as committee. I threw no obstacles in the way of Mr. Croxdale or Mr. Bastin.

Mr. WALLACE. Mr. Fenning, you have testified as to two or three of these cases that you prosecuted the claims of these soldiers for their money before the Departments without charging an attorney's fee. Is this true as to all of these soldiers' claims or only a portion of them?

Mr. FENNING. What does that question refer to—claims for arrears of pay?

Mr. WALLACE. As I understand it, you charged in some cases and made no charges in others.

Mr. FENNING. That probably refers to a statement that I make in my account to the court, to the effect that I prosecuted the claims for arrears of pay for my wards without compensation; and that applies to every case.

Mr. WALLACE. Do you remember anything about how many of these cases there are where you saved the attorney's fee for your ward? Do you remember that?

Mr. FENNING. How many there were?

Mr. WALLACE. Yes, sir.

Mr. FENNING. I imagine I have prosecuted claims for arrears of pay and have succeeded in securing an allowance of those without there being any counsel fee for the services in 75 cases.

Mr. WALLACE. Were there any attorney's fees paid for the services before the Department in that particular connection?

Mr. FENNING. In such cases?

Mr. WALLACE. Yes, sir.

Mr. FENNING. None that I recall.

Mr. WALLACE. Who were the attorneys employed, and did your law partner, Mr. Coldren, act as attorney before the Departments in any of these cases?

Mr. FENNING. He has not acted as attorney in any one of those cases.

Mr. WALLACE. If you were so anxious for the welfare of these ex-soldiers as you have indicated by your testimony, why did you employ your law partner, Mr. Coldren, as attorney in these proceedings before the court and give him, usually, a \$25 fee if that is so?

Mr. FENNING. I answered that very fully the other day, sir.

Mr. WALLACE. Were not these old soldiers' petitions executed by Doctor White merely a stereotyped form in which it was only necessary to insert the name of the patient and the amount of his claim?

Mr. FENNING. Oh, no. There was an original petition prepared in every case.

Mr. WALLACE. Is it not true that these cases were prepared under your direction and presented by you personally to the court, and that Mr. Coldren rarely, if ever, appeared in court in any of these cases?

Mr. FENNING. I have answered that in my former testimony as to Mr. Coldren's connection with the cases.

Mr. WALLACE. Where and from whom did you get your information relative to arrears of pay and bounty for these ex-soldier patients, so that you were enabled to state the amounts due them in the petitions you prepared for Doctor White's signature?

Mr. FENNING. I do not recall ever having stated the amount that was due in the petitions. It would be rather a hard thing to state it at all definitely.

Mr. WALLACE. Why did you call in two physicians to testify as to the insanity of these ex-soldier patients when one would have been sufficient?

Mr. FENNING. I explained very fully the other day that Justice Barnard concurred with me in the opinion that there should be the testimony of two physicians in each case.

Mr. WALLACE. But it is a fact that you have used one at times, is it not?



Mr. FENNING. I have in occasional cases, but the court looks with disfavor upon declaring a man a lunatic upon the testimony of one doctor.

Mr. WALLACE. In what cases, if any, were you ever appointed a committee upon the petition of Doctor Richardson?

Mr. FENNING. None. I was appointed committee in some cases prior to Doctor White's coming to the hospital, but I was not appointed on the petition of Doctor Richardson in any case.

Mr. WALLACE. How many cases have you had, outside of patients from St. Elizabeth's, in which you have been appointed committee?

Mr. FENNING. Committee and guardian? Oh, I should say twenty or twenty-five.

Mr. WALLACE. Those are synonymous terms, as I understand it.

Mr. FENNING. In our courts we appoint the guardian of a minor and the committee of a lunatic or drunkard.

Mr. WALLACE. You have stated that you are now committee in 65 cases. How many of these wards of yours are now or were formerly patients in St. Elizabeth's?

Mr. FENNING. Nearly all.

Mr. WALLACE. How many cases altogether have you had from St. Elizabeth's upon the petition of Doctor White and upon the petition of any other persons?

Mr. FENNING. I do not know. I have never had any cases from St. Elizabeth's where the petition was executed by anybody in connection with the hospital except the superintendent.

Mr. WALLACE. You state that you saw certain doctors at St. Elizabeth's with reference to your appointment as committee in these ex-soldier cases. Please name these doctors if you can name them.

Mr. FENNING. Yes; that was prior to Doctor White's coming here. I talked personally with Doctor Stack, the acting superintendent, Doctor Simpson, and Doctor Clark.

Mr. WALLACE. Did you personally prevail upon Doctor White to recommend you for appointment as committee in his petitions, or did you manage this through someone else?

Mr. FENNING. I went directly——

Mr. WALLACE. If the latter, state the name of the party who represented you in the matter.

Mr. FENNING. I went directly to Doctor White. He was the head of the institution, and I told him what I was doing and what I would like to do and what I was ready to do.

Mr. WALLACE. Is it not true that the Washington Loan and Trust Company only charge 5 per cent commissions upon these funds and that your charges are from 8 to 10 per cent, and in some instances higher?

Mr. FENNING. I would say, in answer to that, that I have personally examined a good many of the accounts of the Washington Loan and Trust Company and have found that they did not give the lunatic credit for interest on deposits and that they had charged for their services a flat rate of 5 per cent. I deposit the funds of my wards in trust companies and savings banks, and invest them in first mortgage notes, with the approval of the court, and get 2, 3, or 5 per cent interest. The whole amount of that interest goes to the wards. When you take into consideration the fact that the trust company, in many of the

accounts that I have examined, has not credited the interest to the ward, certainly they ought to charge a ward a less percentage than they would otherwise. My charge has been fixed upon my own opinion of the value of the services and what I have been able to accomplish for my wards, and it has had the approval of the court.

Mr. WALLACE. I believe I understood you to say that the Washington Loan and Trust Company fee was 5 per cent?

Mr. FENNING. I have said that I have examined some of their accounts filed in court, from which it appears that they have not allowed the lunatics interest on the accumulated funds, and that they usually charge for their own services 5 per cent; and that I have allowed them the interest and I have charged a percentage that I thought was proper in view of the services, and that percentage has been approved by the court.

The committee (at 2.45 o'clock p. m.) went into executive session, and subsequently adjourned.

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#### HOUSE OF REPRESENTATIVES,

*December 13, 1906—10 o'clock a. m.*

The committee appointed by the Speaker of the House of Representatives to investigate the management of the Government Hospital for the Insane met at 10 o'clock a. m.

Present: Messrs. Olcott (chairman), Smyser, Hay, and Wallace. Present also: Dr. William A. White, superintendent of the Government Hospital for the Insane; Dr. Mary O'Malley; Dr. William Mabon, superintendent of the Manhattan State Hospital, Wards Island; Dr. George A. Smith, superintendent of the Central Islip Hospital of the State of New York; Mr. James MacGregor Smith, president of the board of managers of the Central Islip State Hospital; Mr. Richard P. Evans, representing the Medico-Legal Society of the District of Columbia; Hon. Frank Clark, a Representative from the State of Florida.

#### TESTIMONY OF DR. WILLIAM MABON.

Dr. WILLIAM MABON, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor, you are at present superintendent of the Wards Island Hospital for the Insane, are you not?

Doctor MABON. Superintendent of Manhattan State Hospital at Wards Island, New York City.

The CHAIRMAN. How long have you occupied that position?

Doctor MABON. Since May, 1906.

The CHAIRMAN. You were officially connected with the State of New York prior to that time, were you not?

Doctor MABON. For a great many years.

The CHAIRMAN. What was your connection with it?

Doctor MABON. I have been superintendent of two institutions for the insane prior to taking my present position, namely, at Willard, 1895 to 1896, and at the St. Lawrence State Hospital, Ogdensburg, from 1896 to 1906. I then became general superintendent of Bellevue and allied hospitals in New York City—that is, Bellevue, Gouverneur,

Fordham, and Harlem hospitals—and was consulting physician to the psychopathic wards at Bellevue hospital. In 1904 I was appointed president of the New York State commission in lunacy, retaining that place until I assumed the position at Wards Island.

The CHAIRMAN. Doctor, will you tell us, generally, what the duties of the State board of lunacy are?

Doctor MABON. The duties of the State commission in lunacy of New York State are to have general oversight and supervision of the financial operations of the institutions, and also inspection of the institutions, with power to enforce their recommendations as to discipline, order, care of property, standard of care of the patients, and in fact everything relating to the institutions.

The CHAIRMAN. Does the State board have power to control the superintendents of the several institutions relative to the care of patients?

Doctor MABON. They have power to enforce their recommendations; yes, sir.

The CHAIRMAN. So that in case any institution had been complained of, and the State board found that the superintendent was pursuing a wrong course, they could make recommendations which they could enforce thereafter.

Doctor MABON. Practically so. The superintendent is appointed by the State commission in lunacy and confirmed by the local board of managers. The matter of the discharge of a superintendent rests with the board of managers, but must be confirmed by the State commission in lunacy. The process is reversed.

The CHAIRMAN. Now, each of the public institutions for the insane has a local board of managers, has it not?

Doctor MABON. Yes, sir.

The CHAIRMAN. They are not paid officials in any way, are they?

Doctor MABON. No; they are officials who are interested in the philanthropic work of the State.

The CHAIRMAN. They are appointed by the governor of the State?

Doctor MABON. They are appointed by the governor of the State and confirmed by the senate.

The CHAIRMAN. What are the duties of these several boards of governors of the different hospitals?

Doctor MABON. The board of managers, as it is designated by statute, has control of the internal management of the institution. They see that the standard of care is kept up; they pass upon the quality of food supplies; they are empowered to investigate any complaint against an employee or officer; and they also have the power of dismissing the superintendent, but with the consent or approval of the State commission. They visit the institutions and note the result of their visits, and any recommendations they have to make and copies of these findings are sent to the governor and to the State commission in lunacy. Likewise, at their monthly meeting they report, on forms which are gotten up by the governor, to the governor and to the State commission in lunacy the conditions as they find them. That takes in matters in regard to the farm and grounds, the clothing of patients, the food supply, the condition of the laundry, the ventilation of the wards, the training school, the number of trained nurses, the population of the institution and the increase or decrease since the last meeting of the board, any method of special investigation undertaken in a

scientific way by the members of the staff, and in fact everything pertaining both to the medical and the material side of the institution.

The CHAIRMAN. Now, Doctor, to come down to your own hospital, how many patients have you there, approximately?

Doctor MABON. We have approximately 4,300 patients.

The CHAIRMAN. What class of people are your patients drawn from?

Doctor MABON. They are drawn from the middle and lower walks of life, as the State does not undertake the care of those who are able to pay for their support in a private institution.

The CHAIRMAN. Do all of your patients come from the boroughs of Manhattan and the Bronx?

Doctor MABON. From the boroughs of Manhattan and the Bronx.

The CHAIRMAN. Are there any pay patients at Wards Island?

Doctor MABON. There are some reimbursing patients and one or two pay patients—that is, patients who can not afford to pay the minimum rates charged in private institutions.

The CHAIRMAN. Do the regulations of the institution allow any pay patient to be sent there, provided he is willing to pay the charges that you make?

Doctor MABON. Yes; the regulations of the State commission in lunacy provide for that. That is a matter controlled by the State commission in lunacy, but we are not supposed to take those who can pay the rates charged in private institutions, because the institutions are crowded, and therefore the indigent poor of the State should have preference in the rooms provided by the State.

The CHAIRMAN. How many attendants have you at Wards Island? I do not mean general employees, but those who attend upon your patients.

Doctor MABON. We have an average of one to nine.

The CHAIRMAN. Can you tell me approximately the wages that are paid to these attendants?

Doctor MABON. Yes. The wages for men begin at \$22.50, and they are increased a dollar a month for every six months of service until two years have elapsed. Then, if they become charge attendants, they have a still higher rate. That is, they begin at \$26, don't they, Doctor Smith?

Doctor SMITH. Just \$5 more.

Doctor MABON. They begin at \$26, and run up practically to \$31. Then, if they are graduate nurses, they have a still higher rate. I don't recall at this time just what that is; it is about \$36, I think. Then, if they are in charge of a ward, they receive \$2 a month more, I think. That makes it about \$38, I think, Doctor Smith?

Doctor SMITH. Yes.

The CHAIRMAN. The compensation of the male attendants, then, ranges from \$21 to \$38?

Doctor MABON. Ranges from \$22 to \$38.

The CHAIRMAN. You board them—they lodge with you and board with you?

Doctor MABON. They receive their maintenance; yes, sir.

The CHAIRMAN. Does that include washing, too?

Doctor MABON. That includes washing, too.

The CHAIRMAN. Will you state also the pay that the women attendants receive?

Doctor MABON. The women begin, I think, at \$16, and run up on the same scale, \$16 to \$32 or \$33, I think; that may be a dollar or two out of the way.

The CHAIRMAN. Now, will you give me the hours of service?

Doctor MABON. Those in connection with ward service begin at 6 or half-past 6 in the morning and remain until 6 or half-past 6 at night, with the exception of every other night, when they remain until 8 o'clock. They have thirty-six hours' pass, or leave of absence, every two weeks, and two weeks vacation in the summer.

The CHAIRMAN. Do you think that there would be any advantage in their not having to work so many hours, the idea being to have three shifts instead of two?

Doctor MABON. I think it would work to the disadvantage of the institution. I think that the employees themselves would ask for a change back to two shifts if the three-shift plan were in operation.

The CHAIRMAN. Why do you think it would be a disadvantage to the institution?

Doctor MABON. In shifts of eight hours the time of beginning and ending duty would conflict very much with the operations of the institution. If an attendant went on at 6 o'clock in the morning and went off at 2 o'clock in the afternoon, right after dinner, the patients would have to have a new set of attendants; the number would have to be decreased somewhat, and they would remain on duty until 8 o'clock, and some of the patients do not go to bed until 9 o'clock. Therefore there would be no one except the regular night force to assist them in going to bed—undressing, bathing, and whatever care they might need.

The CHAIRMAN. What do you find is the effect on patients of changing attendants constantly?

Doctor MABON. The effect is, as a rule, bad. Under the present system the patients become acquainted with the attendants, begin to know them intimately, and they are more easily controlled by attendants they know and like. It takes time for the attendant to understand the peculiarities of the individual patients, and to know how to manage them in the very best way.

The CHAIRMAN. How much ground have you at your institution?

Doctor MABON. Three hundred acres.

The CHAIRMAN. Is that under cultivation?

Doctor MABON. Practically all, except that occupied by buildings. We have about 180 acres, I think, under cultivation; but it is under cultivation as garden land and not as farm land.

The CHAIRMAN. What do you raise there—the vegetables?

Doctor MABON. We raise all the vegetables which are used at the institution during the season, except potatoes; those we buy.

The CHAIRMAN. Doctor, as far as your control over the institution is concerned, are you the absolute head, so that you can discharge any employee?

Doctor MABON. Yes, sir; I can appoint or discharge any employee.

The CHAIRMAN. Who takes care of the supply department?

Doctor MABON. We have a steward.

The CHAIRMAN. What does he receive; do you remember?

Doctor MABON. The steward, in the ordinary institution in New York State, receives from \$1,500 to \$2,000 a year. There are three or four institutions in the State which have what are called resident stewards and a purchasing steward. The purchasing steward for the

Manhattan State Hospital, the Central Islip State Hospital, the Kings Park State Hospital, and the Flatbush State Hospital, does all the purchasing for those institutions. In the case of three of them—Central Islip, Kings Park, and Flatbush—they have a resident steward, who receives \$1,500 a year. In the case of the Manhattan State Hospital this purchasing steward also acts as steward of that institution, and has an assistant who relieves him of the detail, and who receives \$2,000 a year.

The CHAIRMAN. Are those supplies purchased by regularly advertised bids?

Doctor MABON. The majority of the supplies are. Food supplies—meats, flour, etc.—crockery, glassware, paints, oils, drugs, and articles of that kind are purchased on joint contract; that is, a contract made by a committee of stewards of the State hospital system for the entire State. Other supplies are purchased directly, sometimes without public advertising; simply by sending out a number of bids to responsible dealers; those are the small articles.

The CHAIRMAN. How are the appropriations made by the State for the care of patients?

Doctor MABON. The appropriations are made by the two branches of the legislature and approved by the governor. They divide our maintenance appropriation into three parts: First, officers' salaries; second, wages of employees; and third, the rest of maintenance. That takes in everything in the way of maintenance. Those are lump sums. The State commission in lunacy has at its office in Albany several clerks who pass upon our estimates. Under the law we have to estimate in detail for everything we buy and everyone we employ; for example, a package of pins, or a dozen packages of pins, so much money, and so on. That estimate is subject to revision by the State commission. These clerks go over the estimates and bring them to the attention of the commission at its meetings; then, when they are reduced and approved, they are sent back to the institutions and the purchases made.

Now, in the payment of those bills we can not exceed the prescribed quantity or price of any article. If the bill shows an excessive quantity or an excessive price, the bill is returned at once for an explanation. In other words, if after a price has been fixed for a certain commodity we find we can not purchase it for that price, we make a reestimate and send it to Albany with the explanation. Then, if they are in possession of information showing where we can get these things at the lower price mentioned, they will give it to us; otherwise they will approve that reestimate as submitted.

The CHAIRMAN. The appropriation then is made from these specific estimates?

Doctor MABON. Well, the appropriation is made by the request of the commission, and it is a lump sum for each of those three items—salaries of officers, wages of employees, and general maintenance. That is a lump sum, and we must live within it.

The CHAIRMAN. Well, you must live within the limit of each one of the three items?

Doctor MABON. The commission must so manage the financial end that none of the three items shall be exceeded.

The CHAIRMAN. Suppose there is a balance in one of the three items, can that be expended, in your discretion, in one of the other items?

Doctor MABON. No, sir; if there is a balance in one of those three items it can be carried over to the next year.

The CHAIRMAN. You don't cover it back into the treasury?

Doctor MABON. We don't cover it back into the treasury. Where it is for special purposes, such as extraordinary improvements, new buildings, or anything of that kind, the appropriation lasts two years, and if it has not been used up at the end of that time it goes back into the treasury unless reappropriated.

The CHAIRMAN. Doctor, I didn't ask you in regard to the medical staff; how many have you?

Doctor MABON. We have practically thirty men on our staff. I have two first assistant and two second assistant physicians, a number of assistant physicians, a number of junior physicians, and physicians which are called internes. In addition, I have two or three men who are there without salary; and those men go there to study psychiatry, with the idea that if they show that they have qualifications for that work they will be made internes or juniors upon taking the civil-service examination. If we find, however, that they are not likely to do well, we so tell them, and suggest that they go to general practice or into other fields. That enables us to recruit our staff with trained men instead of getting men just out of college without any experience whatever.

The CHAIRMAN. What are the salaries of these physicians?

Doctor MABON. They range from \$600 a year to \$2,500 a year.

The CHAIRMAN. You spoke of civil-service examinations a moment or two ago. Are the attendants generally under the civil service?

Doctor MABON. Yes; they are under civil service, in what is known as the noncompetitive service. We have a local examining board at the institution, which examines the applicants for the position of attendant.

The CHAIRMAN. Does that local board consist of some of your staff?

Doctor MABON. Yes, sir; we have two physicians on it.

The CHAIRMAN. So that, to all intents and purposes, you have the control of the appointment as well as the discharge of the employees?

Doctor MABON. I have; yes.

The CHAIRMAN. And that is so not only with regard to the attendants, but also with regard to the medical staff and the other employees?

Doctor MABON. Yes; including mechanics, heads of departments, etc., with the exception of the steward, and I have the appointment of the steward subject to the approval of the State commission in lunacy for this reason, that the steward, having to do very largely with the financial matters in relation to the institution, should be some one in whom the State commission also has confidence.

The CHAIRMAN. Are any of the employees—the steward, for instance—under bond?

Doctor MABON. He is now; yes.

The CHAIRMAN. What is the cost per capita of your institution?

Doctor MABON. One hundred and sixty-eight dollars in round numbers.

The CHAIRMAN. For each patient per year?

Doctor MABON. For each patient per year. Throughout the State generally it is about \$185. Some other smaller institutions run up over \$200 per capita, and of the larger ones the lowest, I think, is Doctor Smith's, with about \$161 or \$162.

The CHAIRMAN. Now, Doctor, with regard to the employment of patients. Are many of your patients employed?

Doctor MABON. Between 70 and 80 per cent.

The CHAIRMAN. What kind of work do they do?

Doctor MABON. The men do the garden work, keep the roads and lawns in repair, work in the carpenter shop, work with the engineer, work in the boiler room, in the laundry, on the wards, in the kitchens, and do general work around the institution that man is adapted for.

The CHAIRMAN. Do they do any work in the service of meals?

Doctor MABON. Yes; in certain wards we assign a certain number of patients as waiters. They look after the dining room—under the charge of an attendant, of course; they clean the dishes; they keep the place clean, and they serve the food, or assist the attendants in serving the food.

The CHAIRMAN. Do your women patients do sewing also, and make some of the clothes for the institution?

Mr. MABON. Yes; and our men also, I might say. All the clothing for men is made at the institution. The conditions are such that we can do it. We have there, for instance, a good many tailors—men who have been trained in that sort of work—and therefore we can get better results, perhaps, in the institutions around New York than they can in other parts of the State. The women do the work in the laundry; they work in the kitchens and also in the dining rooms. We have one workshop devoted especially to women workers. They make baskets; they make articles out of raffia; they make rugs out of old scraps of flannel and whatever woolen material we supply them; they make rag carpets; they make mattresses; they make all the clothing of the patients; they make pillow shams; they do Mexican drawn work, and a lot of that work which is very attractive and adds to the appearance of the wards, and some patients who do that will not do anything else. Therefore we try to get them interested in some sort of employment.

The CHAIRMAN. Everything that is made in your institution is used in the institution?

Doctor MABON. Used in the institution; yes, sir.

The CHAIRMAN. Have you ever had any controversy at all with any of the trades union people in regard to these matters?

Doctor MABON. Never. The State law provides for that practically, in that the prison law provides for the manufacturing of things in the prisons and for all the institutions of the State and municipal and county branches, with the exception of those things made in State hospitals. That clause in the prison law gives us authority to make anything we can.

The CHAIRMAN. Would you have authority under the law to sell anything?

Doctor MABON. No; we would not, any more than a prison has authority.

The CHAIRMAN. How do the male and female patients compare in numbers; are they about the same?

Doctor MABON. No; we have more women than we have men.

The CHAIRMAN. Have you any woman physician in your hospital?

Doctor MABON. Yes; we have two women physicians.

The CHAIRMAN. They are regularly on the medical staff?

Doctor MABON. Yes. One is called a woman physician; the other is called an interne. The law provides for one woman physician in every State hospital; in addition we have an interne who is a woman.



The CHAIRMAN. Have you a special superintendent, too, with regard to the work that the women do?

Doctor MABON. We have a matron, and the matron has general charge of the housekeeping of the institution and also the supervision of the training school, and in order that she may devote more time to that I have recently given her an assistant to relieve her of the duties of housekeeping, so that she could concentrate her work more upon the training school.

Mr. SMYSER. Suppose the law did not provide for the employment of a lady physician, from your experience would it be advisable to employ them in such institutions?

Doctor MABON. I think that a woman physician has a definite value to an institution. When the matter was first brought up, in 1889 or 1890, I questioned the advisability of it; but since that my experience has been that they have a definite value, if you select the proper woman.

The CHAIRMAN. Doctor, do you employ any female nurses in the men's wards?

Doctor MABON. We do in a number of the wards, and when they are employed in the men's wards they get the same pay that the men get.

The CHAIRMAN. When you said one to nine, did you mean to include all the employees, or only the attendants?

Doctor MABON. No; the ratio of all the employees is about one to four or five. I referred to those who are directly connected with the insane—the attendants and nurses.

The CHAIRMAN. That is one to nine; and when you take in all the employees it is one to four or five?

Doctor MABON. Yes.

Mr. SMYSER. Doctor, do you consider that you have a sufficient number of employees—one to nine—to give the proper care to the inmates of your institution?

Doctor MABON. I think we have; yes. In a smaller institution that would not be enough, perhaps, but you must recollect that we have more attendants than that, because some are assigned to patients who are out of doors working, and they are not directly connected with the wards. We would not have room in the building for any more employees.

Mr. SMYSER. Now, as to the pay of these employees; is that sufficient, in your judgment?

Doctor MABON. The pay of the employees was raised by direct action of the legislature two years ago, 25 per cent. That whole matter has been before the legislature, and I understand there is very little complaint on the part of the employees. The employees, however, want shorter hours, if it can be arranged, and there is a committee of hospital superintendents now trying to work out some schedule by which they can give the ward employees shorter hours if possible. Our mechanics have shorter hours; they have eight hours. They begin their work at 8 o'clock and stop at 12; begin at 1 and stop at 5.

The CHAIRMAN. Do the mechanics live in the institution?

Doctor MABON. Some do and some do not. If they live outside, they have what is known as a commutation.

Mr. SMYSER. Considering, however, the character of the work to be done, from your experience would it be practicable to reduce the hours of the employees?

Doctor MABON. I do not think it would, myself. I think that the kind of work that is done in hospitals for the insane is entirely different from the pure labor that you see outside. The conditions are different. You have to use the same judgment as you would in a general hospital with a nurse. These people are sick. In many cases the work is not so hard as the hours are long. In some particular cases, with certain classes of patients, the work is very hard, but in the majority of cases the work is not so hard.

Mr. SMYSER. Now, to apply the question that I put to you to the subject-matter under investigation: In your judgment, would that be true at St. Elizabeth's?

Doctor MABON. As to the hours of labor?

Mr. SMYSER. Yes, sir.

Doctor MABON. Well, I don't know that I am qualified to pass upon that, except in this way: It is a general proposition which I think should apply everywhere, unless there are some local conditions which would modify it.

Mr. WALLACE. I would like to ask the doctor if he has visited St. Elizabeth's.

Dr. MABON. I have. But a matter of that kind, Mr. Wallace, would take me several days to go into before I could formulate what would be proper for St. Elizabeth's.

Mr. SMYSER. You would want to be familiar with the local situation?

Doctor MABON. In all its details; in all its ramifications.

Mr. SMYSER. But from your experience, and assuming that conditions are practically the same at St. Elizabeth's as they are at Wards Island and wherever else you have been, what would you say as to the hours of employees?

Doctor MABON. I should say that it would be very difficult to make them any shorter, and that the reason I gave for it I still hold.

Mr. SMYSER. Do you have any complaints of maltreatment of patients?

Doctor MABON. We do; yes, sir.

Mr. SMYSER. That obtains over in New York as well as at St. Elizabeth's?

Doctor MABON. It obtains in New York; yes, sir. As commissioner of lunacy I had complaints and went to the institutions and investigated them.

Mr. SMYSER. Now, when complaints come, what is done, usually?

Doctor MABON. When a complaint comes to me, either by word of mouth or by letter, I immediately start an investigation. I see the physician in charge of the service; I see the attendants in charge of the ward; I see the patient and make a personal examination of him. I also talk to those patients who are intelligent enough to give some idea of what has taken place. It is not to be supposed that in a large institution, where a large number of people are employed, acts of cruelty will not sometimes take place; but it is to be supposed that no one should be more interested in stopping such practices, if it is possible, than the management of the institution. And therefore these cases are isolated cases.

Very often I find that the complaints are not based on fact. In fact, a week or ten days before I came down here, I had a complaint from a woman that her husband had been abused and his arms were black and blue. I saw the patient; I made a personal examination; I

stripped him. There was not a sign of a bruise. He denied that he had been abused. I then asked the Jewish rabbi, who gives services there occasionally, to investigate that case for me and talk to the patient and find out if he had any more information that he could give, whether he was trying to hide anything from me, and he came and said that there was absolutely nothing to it; the patient denied any abuse whatever. Among the other complaints it was said that he had lost a great deal of flesh. He was a well-nourished man. The Jewish rabbi saw the wife of the patient and found out from her that some one had told her that her husband had been abused. In her letter she said she saw him. As a matter of fact, she did not see him. Some one had told her that. But we never neglect investigating any complaint that comes to us.

Mr. SMYSER. I suppose this is true at St. Elizabeth as well as it is over in New York; until human nature is differently compounded you will have such complaints, and perhaps instances of actual cruelty or maltreatment?

Doctor MABON. There may be a case of actual cruelty, and if we find such a case we very often—or it has been done throughout the State—refer it to the district attorney, and in some cases punishment has been meted out by the courts. But as we increase our night service and increase the number of supervisors we have fewer complaints of abuse. You have to recognize the patient's mental condition very often, too. Complaints will be made without any foundation in fact, except as the creation of a disordered mind, such as delusions of persecution.

The CHAIRMAN. Doctor, how about restraint in your institution?

Doctor MABON. We use very little restraint. Last month we had one patient in restraint during the entire month a total of twelve hours, and one other patient in restraint one hour.

Mr. WALLACE. What was the character of the restraint?

Doctor MABON. The character of the restraint was what is known as a protection sheet.

The CHAIRMAN. What is that?

Doctor MABON. The protection sheet is a sheet made of canvas which fastens down over the patient in the bed. The patient has every use of the extremities, both upper and lower.

The CHAIRMAN. Doctor, you haven't any criminal insane, have you?

Doctor MABON. We occasionally have a criminal case, but it is transferred at once to the State Hospital for Insane Criminals.

The CHAIRMAN. You are not expected to care for any criminal insane?

Doctor MABON. No.

Mr. SMYSER. And, not having criminal insane, when you come to give a judgment in respect to St. Elizabeth's, that is a fact which you would have to take into consideration, isn't it?

Doctor MABON. Oh, I have had experience with criminally insane, because as president of the State commission in lunacy I have been through not only the asylum for criminal insane in New York, but also for the far more dangerous class of insane convicts. They have two institutions in New York State, one for insane criminals, the other for insane convicts. I looked very carefully yesterday into the building and provision for the criminal insane at St. Elizabeth's.

Mr. SMYSER. Well, from your experience, and from your observation over here at St. Elizabeth's, what is your judgment as to the management of that institution in that regard?

Doctor MABON. I have no criticism to offer with regard to the management of the building for the criminal insane, either in its arrangement or its management. I saw one patient in restraint, and I believe that that patient should be in restraint; I think that if he was not in restraint the management would be derelict.

The CHAIRMAN. What was the method of restraint in that case?

Doctor MABON. The method of restraint was a belt around the waist, with wristlets. The man had motion of his hand.

The CHAIRMAN. Doctor, when were you at St. Elizabeth's?

Doctor MABON. Yesterday.

The CHAIRMAN. Had you ever been there before?

Doctor MABON. I was there in 1903, when Doctor Richardson was here. I simply went there to see the new buildings. I went there with our national association that met here then. We saw the new buildings, and also went through the old buildings in a casual way.

The CHAIRMAN. Doctor, from your experience in these several hospitals of which you have spoken, what have you to say relative to the buildings of the Government Hospital for the Insane at St. Elizabeth's?

Doctor MABON. I think that some of them are the best, both in the building and the arrangement, that I have ever seen. The older buildings are kept up to date. There are changes being made in them to bring them up as nearly as possible to safety from fire. They are clean and well arranged, and I have no criticism to make of them.

The CHAIRMAN. What do you think, generally, in regard to the scientific appliances there—the therapeutic appliances?

Doctor MABON. I also took up the matter of treatment of patients—how they were cared for, how the case records were kept—and I want to say that Doctor White is right in with those who are doing the best class of scientific work. We are getting out of the old rut of making notes at the end of three months "Unchanged," or "Patient is excited" or "depressed." We are getting down to facts. It takes time to do that, and the records there show that the daily events of the patient's life are recorded, so that it is going to enable the doctor, when he gets a number of cases, to draw definite conclusions from definite data. And that brought up a very important question to my mind, and that was the matter of the commitment of the insane from the District of Columbia. I must say that I think that should be criticised and should be criticised very strongly. Outside of Illinois, and perhaps one other State, I know of no other place where the method of commitment is the same.

The CHAIRMAN. In what regard do you think it is worthy of criticism?

Doctor MABON. I think it is worthy of criticism in that every person who is a resident of the District of Columbia when he becomes insane must go before a jury. I think that it is the only place that I know of, outside of the two mentioned, where there is a direct adjudication as to a patient's insanity by some one who is not a doctor. In other words, in New York State a patient is sent to an institution by the order of a judge. That patient is not adjudicated insane unless there is a committee appointed of that patient's person and estate. Then it goes before a jury of 12 men. Here every case that goes

through must go before this jury. Now, if a patient is discharged at the end of three months, improved and the doctor is unable to certify to the court that the patient is recovered, that patient is still considered insane. If at the end of six months that patient is recovered, he is still in the eyes of the law insane; he has passed out of the doctor's hands and the doctor has nothing more to do with the case.

Here is a person of refinement, a member of a good family, who may have certain peculiarities. He has to be dragged into a public court, to be exposed to the gaze of the idle and curious. Now, New York State provides a better measure than that. It protects the liberty of the individual. The procedure is this: There is first a petition made by a relative—the nearest relative, or the house where the patient may be staying; second, the certificate of two physicians, and the examination must be made on the same day—a joint examination. Then there is a notice served upon this patient that his case is going into court. If he demands the right to be heard, he has the right; he can go to court. It may be heard by a referee or it may be heard by a jury. If he does not demand the right, the judge approves the certificate if he thinks the findings are sufficient to warrant him in approving it. The patient then goes to the institution. Now, in that way the liberty of the patient is safeguarded. He has got the right. It is a matter of choice with him whether he goes before the court or not.

The CHAIRMAN. How is a patient discharged in the New York State asylum?

Doctor MABON. He is discharged by the superintendent.

Mr. SMYSER. The law itself determines the character of the superintendent who shall be designated at St. Elizabeth hospital. He shall be a well-educated physician, possessing competent experience in the care and treatment of the insane. I will ask you in this connection how long you have known Doctor White?

Doctor MABON. I have known Doctor White, I suppose, since 1890 or 1891.

Mr. SMYSER. And have you any knowledge of him as a physician, possessing the qualifications that are indicated in the statute?

Doctor MABON. I know him more by reputation than I do personally. Doctor White has a reputation which is universal in his special study of mental diseases and its allied branches.

Mr. SMYSER. And would you say, then, from your knowledge of him, or rather his reputation, that he comes within the description prescribed in the statute?

Doctor MABON. Without any qualification.

The CHAIRMAN. Doctor, what do you think in regard to the advisability of the heads of insane asylums attending conventions of men discussing mental diseases?

Doctor MABON. When I was president of the State commission in lunacy in New York State, we had 13 State hospital superintendents, and we encouraged that sort of thing, because I used to find myself that I never went to a medical meeting without getting something which in the end would be of benefit to the patient. Now, we are doing more than that in New York State. We are having not only our staff meetings, the same as Doctor White has, but we hold a series of meetings four times a year of the different hospitals in the State.

For instance, four times a year the hospitals in the lower part of the State send representatives from their medical staffs. We have a defi-

nite programme, and we have a morning session, an afternoon session, an evening session, and another morning session. The State pays the traveling expenses of those physicians who go to these meetings, and they go four times a year. Now, the result is this: Patients are brought before the staff and they are studied; we do not make a diagnosis—one man does not make a diagnosis in that case; the diagnosis is made by a consensus of opinion of the medical men of the staff who attend that meeting. The patient is not discharged until he goes again before the staff; and by encouraging them to attend the medical meetings and do special medical work, you keep them out of the rut which hospital physicians, particularly asylum physicians, are so apt to get into. It is a very easy thing for an asylum physician to get into the routine way of doing things.

The CHAIRMAN. Doctor, you speak of having staff meetings; how frequently do you have staff meetings?

Doctor MABON. Our institution is divided into two parts—the department for men and the department for women. We have a staff meeting for the women three times a week and a staff meeting for the men three times a week.

The CHAIRMAN. Do you always attend those meetings?

Doctor MABON. No, I do not. It is absolutely impossible for me to attend all the meetings; I attend them when I can.

The CHAIRMAN. Doctor, how frequently do you visit the several wards of your institution?

Doctor MABON. I try to get all through the place about once in two weeks, but I don't go into every ward; it is utterly impossible to do so. I have 4,500 patients; I am charged with the full responsibility of the institution. I get reports constantly, and any matter of special importance is always brought to my attention.

The CHAIRMAN. How often does some one of your medical staff go into each of the wards?

Doctor MABON. My first assistant takes general charge of the medical service for the women's division. He visits every ward practically once a day. He goes all through the service, and the man on the men's side does the same thing. He acts as the local superintendent, in other words.

The CHAIRMAN. Then he makes reports to you?

Doctor MABON. He makes reports to me.

The CHAIRMAN. Do these physicians make daily reports to you?

Doctor MABON. They make daily reports to me, which are also indorsed by the first assistant of that particular service.

The CHAIRMAN. Do the other physicians go through the wards at specified times?

Doctor MABON. Yes; particularly in the acute service, our physicians spend all their time in the wards. For instance, in our acute service we receive at that institution about two thousand cases a year, and in our acute service we have four or five physicians on the ward at all times except at meal times and except in the evening. They report there for duty at half-past 8 in the morning and after their noon meal they go back there and stay until 5 or 6. They have stenographers there with them who take down the results of the examination.

Mr. WALLACE. Doctor, please describe the building that you keep the acute patients in.

Doctor MABON. The building that we keep the acute patients in is composed in part of a general dormitory, which looks like a general hospital ward. There is another dormitory also. We have a number of single rooms there, three of which are used by the physicians and the stenographers in examining patients and in recording the facts. We have a day room, and we have also a hydrotherapeutic equipment, and also what is known as the continuous bath. The continuous bath is a bath used for therapeutic purposes, to take the place of drugs. It is a method which was introduced from Germany, and the patient is placed in this tub of water, with a cradle made of canvas, and a pillow, and at a temperature of from 98 to 100. They remain in that a varying length of time, according to their condition. We have one patient who has been in there off and on since the 1st of September, and the patient will tell you that she likes it. I think, Mr. Wallace, you saw the patient, and you saw that she was very comfortable there. That is one of the means of treatment.

We also have, across the hall from that ward, a ward which is known as a hospital ward. There we do our operating; there we do our electrical work; there we do our eye work; there we do our dental work, and all the work which comes from outside consultants.

Mr. WALLACE. How about barred windows and unbarred windows?

Doctor MABON. We have barred windows and we have unbarred windows; but mostly instead of bars we have a grating.

Mr. WALLACE. Is there any peculiarity, Doctor, about a patient breaking a solid glass window and one with panes in it?

Doctor MABON. Any peculiarity about breaking it?

Mr. WALLACE. Yes.

Doctor MABON. No. That is a common occurrence. We don't give them plate glass, because the State won't stand for that, but we give them the sheet glass.

Mr. WALLACE. Will they break a solid glass window like that [indicating window]?

Doctor MABON. I have seen them take the whole side of a room out, Mr. Wallace; working with their nails at night, taking all the mortar away from the bricks.

The CHAIRMAN. Doctor, do you know anything about the percentage of patients that perform some labor over at St. Elizabeth?

Doctor MABON. No, I do not. I inquired of the doctor in regard to the occupation of his patients, and I found a condition existing there which does not exist in the North. Briefly stated, it is this: There are two classes of patients, the colored and the white. He also has a large number of old soldiers and people from the Navy, and the white people naturally think the darkies should do the work, and the darky naturally thinks he should get compensation for his labor; and the result is that they are unable to accomplish as much here as they would in the North. Again, the climate, and all that sort of thing, has an effect upon these people; they are not so willing. We try to provide them with work according to their trades; it is a matter of treatment. There is no patient put to work except on the prescription, practically, of the physician.

The physician designates whether that man shall work in the tailor shop or whether he shall work in the garden. If he is a tailor, but his condition is run down and he needs out-of-door air, he is going to be assigned to the garden. On the other hand, if a man comes there

who is used to laboring in the street, but it is too hard for him, and you find that that man can work in the carpenter shop, or can work with the engineer, or work in the laundry, where the work is lighter, he is assigned to that. It is all a matter of the study of the individual case. I would not attempt to pass upon the conditions at St. Elizabeth in that respect until I had spent perhaps six or eight months at the institution and knew all there was about it.

The CHAIRMAN. Do you ever compel any of your patients to work?

Doctor MABON. We do not.

The CHAIRMAN. It is entirely voluntary?

Doctor MABON. It is entirely voluntary; it is a matter of trying to cultivate the spirit of occupation on the part of the patient.

The CHAIRMAN. Does the declination on the part of the patient to work affect his treatment in any way?

Doctor MABON. It does not affect his treatment in any way; but we do this: Patients who are employed get better diet than those who are not employed. In other words, they get meat practically three times a day, and the laboring person is very fond of meat. We make their breakfast and their supper better than for the ordinary patient who is indoors all the time.

The CHAIRMAN. That is as much for the health of the patient as it is for any other reason?

Doctor MABON. Yes; but it also acts with those patients as a reward. I am giving you my candid opinion as to my observation.

Mr. WALLACE. It might be well for you to give an idea of your food supply generally.

Doctor MABON. We have a varied dietary. We have no complaint as to the amount the patients get. There is some little complaint occasionally about not being enough sugar, or not quite enough butter, perhaps, or that they want a little more tea and a little more coffee; and there is a committee of the hospital superintendents who are taking that up with the idea of adjusting any little inequalities.

For instance, I am chairman of that committee, and I wrote to the different superintendents as to how much of the ration allowance they had consumed. I found that some said they had consumed all; others had not. I then sent to the office of the State commission in lunacy and got in detail from them a statement of the ration allowances, how much had been purchased—not how much estimated against, but how much had been purchased—and I found that not one institution in the State had purchased right up to their ration allowance. The idea is now that we will take the cost value of all these ration allowances and make recommendation to the commission that they shall make the commodity a little more elastic, so that they can keep within the same money value, but give them a little better variety. The food supplies are good. We get the No. 1 Minnesota spring wheat; we get Chicago dressed beef of a certain weight; we allow a pint of milk for every patient, every person in the institution, and allow 10 per cent more for the sick, and so on through.

Mr. WALLACE. Do you use canned beef?

Doctor MABON. No. Some institutions use some canned corned beef, but most institutions corn their beef.

Mr. WALLACE. Just describe, Doctor, what you give the patients for breakfast, noon, etc.



Doctor MABON. Well, they will have a cereal with milk or sirup, and they will have sometimes bacon and eggs or a piece of steak and coffee. For dinner they will have soup, and a roast, vegetables, and some sort of dessert. For supper they will have macaroni and cheese and a sauce and tea. If they are working patients, they will get, perhaps, cold meat; they may have a piece of hot steak, or baked beans, in addition. The dietary is made up by the chef, submitted to the steward, and then submitted to the superintendent. Before the dietary is printed it is passed upon by the superintendent and changes made.

Now, we have five diets in our institution. It is the only institution, I think, in the State that has five diets. We have a diet for the working patients; we have a diet for the aged and infirm patients, who do not need so much meat, but need more in the way of soft food; milk, eggs, soups, and broths; we have a diet for the acute insane, and the hospital cases; we have a diet for employees; and we have a diet for the ordinary patient. There are five dietaries, therefore, for employees and patients; and we have a sixth dietary for the officers.

The CHAIRMAN. Doctor, when you were at St. Elizabeth yesterday, you looked into the kitchen, I suppose, and saw the food there?

Doctor MABON. I looked into the kitchens; yes, sir.

The CHAIRMAN. What is your general opinion, from your observation, of the character of the food and service?

Doctor MABON. It seemed to be well cooked and well served.

The CHAIRMAN. You saw a meal served?

Doctor MABON. I did not see one of the meals served, because I saw it as it was being taken from the cooking apparatus in the kitchen; my time was so limited that I did not have time to see it served in the dining-room, because I had so many places to see. I wanted to get a general idea of the different buildings, the different parts of the institution, and its different heads.

Mr. SMYER. What was your judgment of the food that you saw?

Doctor MABON. It was very good. I also went into the bakery, and went into the storeroom and saw the flour. The bread is of excellent quality. I found the bread was composed of part spring and part winter wheat. It was white, clean, and sweet. They had corned beef; they had soup first, and vegetables, I think; they had corned beef, and they had sweet potatoes, and they had some dessert; I have forgotten just what that was.

Mr. WALLACE. Did you visit the epileptic department?

Doctor MABON. Yes, sir.

Mr. WALLACE. Please describe how you treat epileptics in your institution.

Doctor MABON. We treat the epileptics according to the special condition of the individual. If an epileptic is a dangerous person, we try to place him in a ward with comparatively few people. If the epileptic is more demented and does not have violent outbreaks, he is placed among that class; but we always keep a special eye on the epileptic, because we do not know when he is likely to have an outbreak of so-called epileptic furor, or when he is going to have a convulsion. From the standpoint of danger, an outbreak of epileptic furor is something to very much feared.

The CHAIRMAN. Do you separate the epileptics from your other patients, Doctor?

Doctor MABON. No; we have a number of epileptics in wards together. We can't separate them; we haven't the arrangement for it, and I don't know whether I would do it if we had the arrangement. I would put them in a certain class of epileptics—among those patients who had to be watched very carefully. Others I would put with those who required a great deal more care and who are more feeble in mind and untidy in their habits and have to be dressed and undressed and bathed. My judgment is that it is better to separate them according to their mental condition rather than according to their epilepsy. Of course, if a patient is going to have frequent convulsions, I would not want him in a ward with convalescent patients, or even new patients—recent cases. I would not want to affect unfavorably the mind of a recent case.

The CHAIRMAN. What did you think in regard to the separation of the different classes of patients in St. Elizabeth's?

Doctor MABON. I think that it permits of a very splendid classification.

The CHAIRMAN. Is the classification over there now good, in your opinion?

Doctor MABON. As near as I could judge. I could not go into it enough; but from my observation of it, I can say that great care has been exercised in separating the patients into their proper classification. You know, Mr. Olcott, that on questions of that kind I can only give you an impression, because I would be very foolish to give you a definite opinion before I had an opportunity to study the conditions carefully.

The CHAIRMAN. Doctor, there is one thing that I didn't ask you about, and that is the amusements that you provide for your patients in your institution.

Doctor MABON. We have an amusement building and we have what is known as an amusement fund. The fund is based upon the population of the institution and it varies at the different institutions. We provide, of course, dances for the patients; we have theatrical entertainments. We are able to get in New York a great variety of entertainments of that kind. We get vaudeville entertainments and all that sort of thing. We also have a field day two or three times a year. We have an orchestra, composed of men and women, who play on the different wards during different days of the week, and play out of doors during the summer time; we provide pianos on the wards for certain classes; we have music boxes, phonographs, cards, and games of various kinds.

The CHAIRMAN. Do you have outdoor games, such as baseball?

Doctor MABON. We play baseball, yes, sir; on Saturday afternoons. Also basket ball for the women.

Mr. SMYSER. You have no football?

Doctor MABON. No football; it has not got there yet. I wonder why. [Laughter.]

Mr. SMYSER. What provision is made for religious services, and what denominations?

Doctor MABON. We have a church which was built by Catholics at the time it was occupied by the city; therefore, we have a Catholic clergyman. He conducts religious services on Sundays, and employees go there to mass and confession. We have also a Protestant

clergyman who conducts services Sunday morning. Then the City Mission has an Episcopalian clergyman up on Wednesdays, and those that desire attend the Episcopal service conducted on Wednesdays. We also have the Jewish services on Saturday.

The CHAIRMAN. Doctor, how many buildings are there on Wards Island?

Doctor MABON. You mean ward buildings?

The CHAIRMAN. Yes.

Doctor MABON. Ten ward buildings, besides a number of detached wooden pavilions for the treatment of the open-air cases—a substitute for tents.

The CHAIRMAN. Do you have a separate house?

Doctor MABON. I have a separate house; yes.

The CHAIRMAN. That is so generally, isn't it, in the institutions in the State?

Doctor MABON. Yes. The State commission in lunacy a few years ago made that change, and provided houses for most of the superintendents. I do not believe there is one now that has not his own house, unless it is at Flatbush.

The CHAIRMAN. From your experience, do you think that is advisable?

Doctor MABON. It is much more desirable, I think.

The CHAIRMAN. Why?

Doctor MABON. If the superintendent has a family of children it is better for them to be away from the environment of the institution. They are very apt, if they live within the administration building, to call upon the employees for assistance, and so cease to be self-dependent. Then the superintendent, after he has gone through an arduous day, is not subject to the beck and call of everyone on trifles, which other people can look after; at the same time, he is near at hand in case an emergency arises.

Mr. WALLACE. Doctor, is the Bowery located in the Borough of the Bronx?

Doctor MABON. Yes; in a way. The old Bowery started down at City Hall and became part of the road that went up through Westchester County; but it is not known up there as the Bowery. It is limited now by the Cooper Union.

The CHAIRMAN. The technical Bowery is not in the Bronx, Mr. Wallace. [Laughter.]

Mr. WALLACE. I am not acquainted with it technically.

Mr. SMYSER. I never ran up against the actual Bowery.

Doctor MABON. You have missed something. [Laughter.] You probably would have missed something if you had. [Laughter.]

Mr. SMYSER. Doctor, you made some observations as to the manner of commitment, and that is one of the complaints out here at St. Elizabeth's. Are you familiar with the statute under which the commitment is made?

Doctor MABON. I am not, except in this way: I asked Doctor White yesterday where he got his patients and how he got the different classes of patients. I understand he gets soldiers upon the order, practically, of some officer in the Army, and he has some from the Navy and some from the Marine-Hospital Service and from the Soldiers' Homes.

Mr. SMYSER. That is one of the important questions out here. I will read from the statute:

It must appear by the certificate aforesaid, which goes to the Secretary of the Interior, that two respectable physicians, residents of the District, appeared before said judge or justice and deposed in writing that they knew the person alleged to be insane; that from personal examination they believed such person to be in fact insane and a fit subject for treatment in said hospital, and that said person be a resident of the District at the time he or she was seized with the mental disorder under which he or she then labored. And it must further appear, by such certificate, that two respectable householders, residents of the District, appeared before said judge or justice and deposed in writing, sworn to and subscribed by them, that they knew the person alleged to be insane, and that from a personal examination of his or her affairs they believed such person to be unable, under the visitation of insanity, to support himself or herself and family, in case such person have a family, or to support himself or herself alone in case such person have no family. The affidavits of said physician and householders shall accompany the certificate of said judge or justice.

Do you observe it does not provide for a jury?

Doctor MABON. As I say, I am not familiar with the words of the statute.

Mr. SMYSER. Well, under the statute, while there may be occasional instances of improper commitment, ordinarily is not the liberty of the citizen pretty carefully safeguarded?

Doctor MABON. I would want to read that statute again before giving an opinion on that point.

Mr. SMYSER. Is it your experience, however, that in commitment a jury ought to be provided to pass on the question of insanity?

Doctor MABON. It is not, except in those cases where the individual feels that he is going to be deprived of his liberty, and then I think that he should have every safeguard which the law can throw around him, and every opportunity to be heard; but the ordinary case, I think, is injured very often by being brought into a court under certain conditions.

Mr. SMYSER. There is an amendment to this; I haven't it before me here. It provides for a jury.

Mr. EVANS. Under the code now it is provided that on a certificate of the physician a man can be committed, but within thirty days after the commitment he is to be brought before the jury.

Mr. SMYSER. The question has to be submitted to a jury?

Mr. EVANS. Yes.

Mr. SMYSER. Well, in practical experience and operation, does that protect, in your judgment, the liberty of the citizen any more than if submitted to the court?

Doctor MABON. No; it does not. I have seen patients that I have passed upon as commissioner of lunacy that demanded their release. I know of three cases, one after another, where a jury released them; the first man committed suicide; the second man made a violent assault upon an individual, and the third man is a nuisance to the community in which he lives, and they can't get him committed because they are afraid that there would be a suit for damages against them. I think that it is safe to assume that in an enlightened community the personal safety of the individual is to be protected by our courts. Every man has the right of a writ of habeas corpus, and I think the decision should not be made altogether by a jury, unless it is a jury of medical men who can pass upon the questions and determine the relative weight that should be given to symptoms.

Mr. SMYSER. We have no jury in Ohio for commitment. That is left wholly to our probate judge on proper medical testimony.

Doctor MABON. I want to make a little further statement, if I may, in regard to the matter of commitment. It is that of voluntary commitments—that is, a patient who has enough appreciation of his condition to know that he is in need of medical treatment should have the right to go to an institution and ask that it be given to him. As it is now, if he appreciates the need of it, he can not get it unless he is committed. Now, a man who has typhoid fever can go to a general hospital and be admitted there and treated. But a man who has approaching insanity, or insanity in its incipient stage, and who feels that he may recover if he has proper treatment, has to wait until he is regularly committed, and the so-called stigma attaches to him.

Now, I believe that enough safeguards can be thrown around that condition to warrant such a process being provided for in not only the District of Columbia, but throughout the United States. In fact, in my presidential address to the New York State Conference of Charities at Rochester this fall, I recommended that the law in New York State be changed so as to provide for voluntary commitments.

Mr. SMYSER. Wouldn't that be pretty dangerous?

Doctor MABON. No. If the man wants to go in, he is at liberty to go away whenever he pleases. That is the practice in our private institutions in New York State; if he doesn't want to stay he may leave. I don't know where the element of danger comes in, Judge, under those conditions. It is not depriving a man of his liberty; the man goes there of his own volition, and if he doesn't like it he leaves.

The CHAIRMAN. Do you want to ask him any more questions about commitment?

Mr. SMYSER. No.

The CHAIRMAN. Doctor, there is one more question I want to ask you. One of the gentlemen who was here before us testified in regard to an absolutely dual management of the asylum. In other words, the superintendent of the asylum would have nothing whatever to do with the supplies.

Doctor MABON. I was in such an institution, Mr. Olcott.

The CHAIRMAN. Well, what do you think of that plan?

Doctor MABON. The first institution was the Morris Plains, N. J., Hospital for the Insane, where they had a dual management. They had a medical director who was supposed to have everything to do with the wards; they had a warden who was supposed to have to do entirely with the outside departments and with the purchase of supplies. An institution for the insane is like a large family. There has to be some directing head. You can't have two captains on a steamer; you can't have two in charge of anything with full responsibility. The clothing of the patient is a medical question; the food of the patients is a medical question; the employment of the patients is a medical question. There should be a business head to an institution who is responsible to the superintendent, and the superintendent should be responsible for all.

Now, if the business head of the institution does not bring the results that are looked for, the superintendent should get rid of him; and if he does not get rid of him, then the institution should get rid of the superintendent. There should be a direct line of responsibility. And I want to say that at St. Elizabeth's I find they have no steward.

I find they have a purchasing agent who purchases supplies. The first assistant physician relieves the superintendent of the outside shops; but there should be some man who is not a medical man for that sort of thing, who can relieve the superintendent of the details, because his time is too valuable for that sort of thing. Take the matter of a disbursing officer. He has to sign all the checks. If he is not there, those merchants who supply the goods have to wait for their money. Now, there should be some one deputized, under bond, who could act for him in his absence.

The CHAIRMAN. Have you such a man in your institution?

Doctor MARON. We have a central treasurer now, but the superintendent was treasurer, and when he was away he had authority under the law to give power of attorney to his assistant to act for him.

The CHAIRMAN. But you believe that there should be one man absolutely in charge of the entire institution, with men under him whom he holds responsible?

Doctor MARON. Yes, sir; they should have certain well-defined duties to perform, but there should be one chief executive responsible for all.

The CHAIRMAN. Is there any further statement you wish to make, Doctor?

Doctor MARON. I do not know of anything, Mr. Olcott.

#### TESTIMONY OF DR. GEORGE A. SMITH.

Dr. GEORGE A. SMITH, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Doctor, you are at present superintendent of the Central Islip Hospital in the State of New York, are you not?

Doctor SMITH. Yes, sir; Central Islip State Hospital at Central Islip.

The CHAIRMAN. How long have you occupied that position?

Doctor SMITH. Since 1895.

The CHAIRMAN. That institution is one of the insane asylums under the State commission of lunacy?

Doctor SMITH. Yes, sir.

The CHAIRMAN. How large an institution is yours, Doctor?

Doctor SMITH. Thirty-nine hundred patients.

The CHAIRMAN. Are they about equally divided between male and female?

Doctor SMITH. No; there are more males than females.

The CHAIRMAN. How many are there on your medical staff?

Doctor SMITH. Sixteen physicians.

The CHAIRMAN. How many attendants are there who have direct charge of the insane?

Doctor SMITH. About 1 to 10.

The CHAIRMAN. How many other employees?

Doctor SMITH. I have 560 employees.

The CHAIRMAN. Other than the insane?

Doctor SMITH. No, all told; taking in the staff and all. That leaves about 185 employees, and the remainder would be attendants, outside of the 16 physicians. That leaves about 300 attendants that are in direct contact with the wards.

The CHAIRMAN. How large in area is the ground upon which your building stands?

Doctor SMITH. One thousand acres.

The CHAIRMAN. How many buildings are there in which there are wards?

Doctor SMITH. There are 63 buildings; 46 wards with patients. When I say wards I mean pavilions.

The CHAIRMAN. How many kitchens have you in the institution?

Doctor SMITH. Three large kitchens.

The CHAIRMAN. How many dining rooms?

Doctor SMITH. At north colony we have six dining rooms; at the south colony three dining rooms. The north colony is made up of detached buildings, groups of three to five pavilions, with one dining room for each group; and there is one large kitchen where the food is disbursed to these six dining rooms.

The CHAIRMAN. How is that distributed from the kitchens?

Doctor SMITH. By wagons. Each dining room also has a service room with a hot table. Tea and coffee is made in each dining room separately.

The CHAIRMAN. Do you have any trouble in getting your food served sufficiently warm?

Doctor SMITH. No trouble whatever. We have quick service from the kitchen to the dining room, and the food goes immediately to the hot table or to the hot ovens there, and is distributed at once.

The CHAIRMAN. What percentage of your patients are engaged in some trade?

Doctor SMITH. Seventy-five to 80 per cent.

The CHAIRMAN. What do they do?

Doctor SMITH. We have patients represented in every industry that we have there—on the farm, in the mat shop, shoe shop, sewing rooms, tailor shops, match shops, brush shops, etc.

The CHAIRMAN. What do you raise on your farm?

Doctor SMITH. We raise all the garden truck that is required for the institution, and potatoes, turnips, and cabbages enough to carry us up to about February.

The CHAIRMAN. Do you raise chickens?

Doctor SMITH. Oh, yes.

The CHAIRMAN. Do you raise enough chickens for your use?

Doctor SMITH. No; we don't raise enough chickens for our entire use, but it is a profitable industry. We raise enough to supply the sick hall and some of the employees, and eggs enough to reduce the amount that we have to call for in the estimate.

The CHAIRMAN. Do you raise hogs?

Doctor SMITH. We do.

Mr. SMYSER. Doctor, I am a sort of a crank on that subject. I wish you would describe pretty fully what you do in that line at your institution.

Doctor SMITH. We have at the present time about six hundred hogs. We raise enough to supply the entire institution with pork. We never buy pork. The feeding of the hogs is from the swill—the refuse left from the table. It does not cost us one cent for our hogs outside of one man who is paid to look after them, and he has with him about ten patients.

The CHAIRMAN. Have you ever had any trouble with hog cholera?

Doctor SMITH. Once.

The CHAIRMAN. How long ago was that?

Doctor SMITH. That was six years ago.

The CHAIRMAN. What did you have to do—kill them all?

Doctor SMITH. We killed them all off and started over again. We didn't eat them, but just killed them and got rid of them and started anew. It pays to start anew.

The CHAIRMAN. You say you have 600 hogs now?

Doctor SMITH. We did before I left home. They are killing them off right along.

The CHAIRMAN. You do the slaughtering and try the lard yourself, do you?

Doctor SMITH. Yes.

The CHAIRMAN. You do everything—use the pig just as it would be used in one of the large establishments?

Doctor SMITH. Just the same exactly. We make our sausages, and make considerable lard—enough to save a certain amount of purchasing.

The CHAIRMAN. You don't buy any bacon at all?

Doctor SMITH. We buy bacon, and we buy hams; we don't smoke. But as to fresh pork, sausages, etc., we don't buy a bit, and never have. Of course, if we find that the swill is getting short, we cut off the hogs; but it is a bad sign to see too much swill. We try to keep it down. We can tell the waste pretty well by what is coming to the pigpen. If we see too much bread, we know there is too much waste at the other end.

The CHAIRMAN. Do you raise wheat?

Doctor SMITH. We raise some wheat and rye—more for the straw than anything else.

The CHAIRMAN. How many horses do you keep?

Doctor SMITH. Twenty-six.

The CHAIRMAN. Does that include the ones used for the transportation of your passengers and for your own use?

Doctor SMITH. Yes; everything.

The CHAIRMAN. Do the patients take care of them to some extent?

Doctor SMITH. To some extent; yes, sir. We have in the barn, outside of two or three drivers and the coachman, about twelve patients at work.

The CHAIRMAN. Doctor, you were at St. Elizabeth's yesterday, were you not?

Doctor SMITH. I was.

The CHAIRMAN. And did you make as careful an investigation of it as you could, considering the time which you had there?

Doctor SMITH. I did.

The CHAIRMAN. Did you visit many of the wards?

Doctor SMITH. I visited most of the wards; that is, for the purpose of seeing the classification. I visited the administration, the reception wards, the epileptic ward, the colored wards, the disturbed wards, the old buildings; I visited the kitchens, saw the food, and tasted it.

The CHAIRMAN. Did you go to Howard Hall?

Doctor SMITH. I don't know it from the name.

The CHAIRMAN. Where the insane criminals are?

Doctor SMITH. Oh, yes.

The CHAIRMAN. Now, Doctor, what is your opinion of the new buildings?

Doctor SMITH. I think they are most excellent buildings?

The CHAIRMAN. What is your opinion of the scientific appliances that there are connected with the institution?



Doctor SMITH. They are simply magnificent. I was very much pleased with them. I was envious of the condition of things in that matter.

The CHAIRMAN. Did you go into the nurses' home?

Doctor SMITH. I went through it and looked into some of the rooms.

The CHAIRMAN. What is your opinion of them?

Doctor SMITH. Very fine, indeed.

The CHAIRMAN. Now, in regard to the old buildings, in what condition did you find them?

Doctor SMITH. The old buildings are in need of repairs, but I understand that Doctor White is making all the repairs that are required; he has anticipated all that is necessary, such as new plumbing, fire appliances, etc. We saw some of the work already in an advanced stage. It struck me that the kitchen and the bakery were rather small and inadequate; there are some antiquated appliances in the kitchen that should be changed, and Doctor White intends to do that.

The CHAIRMAN. How about the cleanliness of the institution generally?

Doctor SMITH. It is perfect.

The CHAIRMAN. Did you look at the food particularly; did you form any opinion as to the character of the food?

Doctor SMITH. I did. The food was good. I tasted the food. They had corned beef and cabbage; they had a soup; the bread was most excellent; and we went through the bakery and saw some cake—I think it was coffee cake or something of that sort.

Doctor MABON. Cinnamon bread.

Doctor SMITH. The patients looked well kept, clean, and well clothed; and, from the patients' standpoint, I think they are getting the very best treatment. I think that when Doctor White can carry out all the improvements he is trying to carry out the hospital will stand second to none in this country.

The CHAIRMAN. How long have you known Doctor White?

Doctor SMITH. I have known him by reputation about fifteen years. I never met him but once before, and that was only to shake hands with him. Yesterday I saw more of Doctor White than I ever have before; but I know him by reputation.

The CHAIRMAN. What is his reputation?

Doctor SMITH. The very best, as a scientific man. He received his schooling, in the matter of administration, at Binghamton State Hospital, and I consider that to be as fine a hospital as there is in the State of New York. My opinion is that the Doctor has been trying to bring that hospital up to the standards of the hospitals of the Empire State; and if he is let alone he will do it and beat us.

Mr. SMYSER. Does he come within the description of the statutes, from what you know of him?

Doctor SMITH. He certainly does.

Mr. SMYSER (continuing). "Being a well-educated physician, possessing competent experience in the care and treatment of the insane?"

Doctor SMITH. He certainly does.

Mr. WALLACE. What is his reputation in that regard?

Doctor SMITH. His reputation stands high; the very best.

Mr. WALLACE. How long were you at the asylum yesterday?

Doctor SMITH. From 10 o'clock until 4 or half past 4, I think.

Mr. WALLACE. What methods of restraint are used in the hospital with which you are connected?

Doctor SMITH. We have the restraining sheet; that is about the only means of restraint.

Mr. WALLACE. Do you have the camisole?

Doctor SMITH. We haven't the camisole; we have the restraining sheet.

Mr. WALLACE. How about your windows, Doctor? Just describe the buildings.

Doctor SMITH. We have the one-pane windows that you saw in our cottages. I mentioned to you at that time that I had found that the patients were less liable to break a window with one pane than they were to break windows that are cut up smaller. That has been my experience there for the last fifteen years. I have never known but one pane of glass of that large size to be broken, and I have seen the same patients knock out the smaller panes.

Mr. WALLACE. How about iron bars in the windows?

Doctor SMITH. We have certain wards that require them. We have the inside grating or the outside grating in some wards. I think out of those forty-six buildings we only have six buildings that have any grating.

Mr. WALLACE. Doctor, would you describe the manufacture of ice in your institution; what it costs you, etc.

Doctor SMITH. Connected with our storeroom is the ice plant; it is in the same building. It is the conduit system. We manufacture five tons of ice and do five tons of refrigeration. It is really connected with the main steam plant; that is, we use the exhaust. We can't find out that it costs us anything for steam at all. We have the big steam plant there, and have an auxiliary to it; and all it costs is the repairs, and one man who has a couple of patients with him; we pay him \$50 a month. We figure, counting repairs, that our ice costs about 50 cents a ton.

The CHAIRMAN. Doctor, did you go into the cold storage plant at St. Elizabeth's?

Doctor SMITH. We looked at it from the outside; we didn't go into the cold-storage plant. We went through the meat shop.

The CHAIRMAN. Are the appliances at St. Elizabeth of that character adequate, in your opinion, as far as you could judge?

Doctor SMITH. I think they should be larger. The doctor receives his meat in a different way than I do. I receive it by carloads. I would not consider it large enough for my institution, and I don't think it is adequate over there. I don't think the bakery or the kitchen or the storeroom are adequate. I do not particularly like the arrangement there. Naturally I am rather proud of my storeroom. But the doctor says that, as well as myself. Considering the conditions, however, he is getting wonderful results.

The CHAIRMAN. Now, Doctor, in regard to your employees: Is the scale of wages at your institution approximately the same as in other institutions in the State?

Doctor SMITH. It is the same throughout the State; the men from \$22 up to \$37.50, and supervisors up to \$60; the women from \$16 to \$22. If they graduate, you just add \$5 more to the salary.

The CHAIRMAN. You have a training school in your institution, haven't you?

Doctor SMITH. Yes, sir.

The CHAIRMAN. Do most of your female attendants go to the training school?

Doctor SMITH. Not most of them; no. We do not oblige them to go; it is voluntary.

The CHAIRMAN. It is merely a case where they can become trained nurses and get higher wages, and so it is entirely voluntary with them?

Doctor SMITH. Yes; it is up to them to take advantage of the opportunity.

The CHAIRMAN. Do you have much difficulty in getting employees?

Doctor SMITH. We do.

The CHAIRMAN. Is that on account of the smallness of the wages, or for what reason.

Doctor SMITH. I think it is due to the smallness of the wages?

The CHAIRMAN. You think the wages of the attendants ought to be higher?

Doctor SMITH. I do.

The CHAIRMAN. Where do your attendants come from mostly?

Doctor SMITH. From New York City and vicinity.

The CHAIRMAN. And where do your patients come from?

Doctor SMITH. The same place. I receive some by a temporary arrangement with Doctor Mabon, of Manhattan, and I also receive from Queens County.

The CHAIRMAN. Do you receive from Suffolk County?

Doctor SMITH. From the southern portion of Suffolk County. That is divided up between mine and Kings Park.

The CHAIRMAN. But that is merely a territorial subdivision made by the commissioners of lunacy, isn't it?

Doctor SMITH. Yes, sir.

The CHAIRMAN. I mean that you haven't any say about it?

Doctor MABON. It is a statute.

The CHAIRMAN. Now, Doctor, in regard to the hours of labor of your attendants, what is your opinion?

Doctor SMITH. Well, the hours of labor are similar to those at Manhattan. The attendants go on at 6 in the morning, and about two-thirds of them leave at 6 at night. Then one or two, depending upon the ward, remain until 7 and one until half past 8. That will come about every third or fourth night. It depends upon the ward. About every third night they have to stay until half-past 8; then the next night they are off at 6; the night after that they will be there. That makes an average of about thirteen hours.

The CHAIRMAN. Do they have about the same time off as in other institutions in the State?

Doctor SMITH. We have cumulative time. They are allowed three days every four weeks instead of thirty-six hours every two weeks. On account of the distance from New York and paying the fare, we give it to them in that way.

The CHAIRMAN. Do they have any vacation other than that?

Doctor SMITH. Two weeks a year.

The CHAIRMAN. Two weeks with pay?

Doctor SMITH. Yes.

The CHAIRMAN. Is that so with you, Doctor (addressing Doctor Mabon)?

Doctor MABON. Yes, sir.

The CHAIRMAN. What do you think of the advisability of having three sets of attendants on the insane patients?

Doctor SMITH. I don't think it would be a good thing. I think it would mix up the service considerably, and I know that it would affect the matter of the employment of patients considerably. I think as Doctor Mabon says, that the attendants would dislike it themselves, because we would have to have what we call a "dog watch," because you don't want the number of attendants on between 6 in the evening and 6 in the morning that you do at other times; consequently you have got to divide that up. They would not appreciate that. They would rather stay on and have it over with. I feel that the attendants would rather have more money than have fewer hours. I think the question of twelve hours could be carried out; possibly ten. I think twelve hours is a good service.

The CHAIRMAN. You think that for the good of the patient it is important to have as few attendants as possible?

Doctor SMITH. I think so.

The CHAIRMAN. What is the reason for that?

Doctor SMITH. They get attached to the attendant, the attendant knows the patient, and each ward becomes almost a family in itself, especially in the chronic wards.

The CHAIRMAN. How is the classification in your institution, compared with that of St. Elizabeth's?

Doctor SMITH. It is no better. Of course, I have no criminal insane.

The CHAIRMAN. What do you do with your epileptics?

Doctor SMITH. We have separate cottages—separate divisions—we keep them separate. We give them a separate diet from the others. Of course, there are individual cases of epilepsy that we have in some of the other wards. We try to classify them in one place. We have one or two wards just for that purpose.

The CHAIRMAN. You have a number of tuberculosis patients, have you not?

Doctor SMITH. Yes; we keep those in separate buildings.

The CHAIRMAN. Did you look at the system of keeping records at St. Elizabeth's?

Doctor SMITH. I did.

The CHAIRMAN. Is that similar to your own?

Doctor SMITH. That is similar to our method. It is up-to-date.

The CHAIRMAN. You don't think that that could be improved upon?

Doctor SMITH. Well we hope that we will improve on all these records, but it is up-to-date at the present time. We are still trying to improve on that if we can. We have not reached the ideal yet.

Mr. SMYSER. Even in New York?

Doctor SMITH. Even in New York; but we are nearer it in New York than they are anywhere else. [Laughter.]

The CHAIRMAN. Doctor, is the purchase of your supplies similar to that in other New York institutions?

Doctor SMITH. The same. There is one purchasing agent for four different hospitals.

The CHAIRMAN. What do you think, from your experience, in regard to the propriety of having a dual management in an institution of this character?

Doctor SMITH. You could no more run it than you could run a wheel with two hubs. Everything in an institution of this kind is medical, as Doctor Mabon said, down to the clothes they wear and the food they eat. There should be but one head, and he should have the hos-

pital divided up, the business portion from the medical side; and he should have the control; he should be at the hub and have control of every spoke, and see that each spoke is in position and the wheel runs straight. He should hold each man responsible for each division. That is the way I do it.

The CHAIRMAN. You have the same power of appointment and discharge of employees that Doctor Mabon has?

Doctor SMITH. Yes, sir; it is the same throughout the State of New York.

The CHAIRMAN. Now, Doctor, do you believe in large institutions?

Doctor SMITH. I certainly do.

The CHAIRMAN. Why?

Doctor SMITH. I think they can be carried on more economically. There is no reason why they can't be carried on just as successfully, as far as care and treatment are concerned. Take a superintendent, with a qualified staff, and divide his hospital up into divisions. At my place I put a senior assistant over each division. He is just as much superintendent of that one division as I am of the whole thing.

The CHAIRMAN. How often do you go into the wards yourself?

Doctor SMITH. I am in some of the wards every day, but I don't go around more than once in two weeks to every ward. The acute ward I try to get into every day that I am at home; and I visit the sick wards frequently. I see, however, that the patients are visited three times a day, if not oftener, by a qualified physician.

The CHAIRMAN. Do you have periodical meetings of your staff?

Doctor SMITH. Twice a week.

The CHAIRMAN. Do you usually attend yourself?

Doctor SMITH. I always attend one; that is the meeting in general administration, etc. Sometimes we have three. I don't always get to the second one.

The CHAIRMAN. Did the buildings at St. Elizabeth impress you as giving room enough for the patients?

Doctor SMITH. Yes; it rather surprised me. There is no overcrowding there. That is the only respect in which I can say that St. Elizabeth excels New York—they are not overcrowded.

The CHAIRMAN. From your general examination of the hospital, do you consider that the institution is well conducted?

Doctor SMITH. I think it is.

The CHAIRMAN. Did the appearance of the patients justify you in that belief?

Doctor SMITH. It did.

The CHAIRMAN. And the actions of the attendants?

Doctor SMITH. The actions of the attendants.

The CHAIRMAN. The character of the food?

Doctor SMITH. Yes; the character of the food.

The CHAIRMAN. The cleanliness of the building?

Doctor SMITH. The cleanliness of the building; and judging from the anticipations of the superintendent and what he is trying to do I think that the results will be very, very satisfactory. They have got the foundation and they have got the buildings.

The CHAIRMAN. Now, Doctor, you said that in Central Islip you had a thousand acres of land. Now, your buildings are all together, aren't they?

Doctor SMITH. No; they are stretched out. The place is divided up into two colonies, what we call the North Colony and the South Colony, with the administration building, which is a separate building, between the two colonies. The distance from the first building of the North Colony to the last building of the South Colony is exactly 2 miles. At the South Colony there is a different arrangement. The buildings are equipped with fireproof corridors, and you can walk, with only one interruption, from one end of the colony to the other—a distance of 1 mile—without going outdoors.

The CHAIRMAN. You have a separate house for yourself, have you?

Doctor SMITH. I have a separate house; yes, sir.

The CHAIRMAN. What do you think of the propriety of that arrangement?

Doctor SMITH. That is the only way to live.

The CHAIRMAN. Why?

Doctor SMITH. Well, we should not be right in the same building with the insane. I know just how the doctor is situated there; I think his nurses are better off than he is. Upstairs there is singing, and he has a church there frequently, and he hears the noise of the patients; I could hear it there. A man wants to be quiet; he wants to be with his family. Doctor White hasn't a family, but—

The CHAIRMAN. That may come in time with the other improvements. [Laughter.]

Doctor SMITH. Now, I am more central; I am right between my two colonies. All the superintendents of the State of New York have the separate building.

The CHAIRMAN. Of course you did not have time to go out to the farm of St. Elizabeth; that is 4 or 5 miles away?

Doctor SMITH. No; I did not.

The CHAIRMAN. Your farm is nearer?

Doctor SMITH. It is all together.

The CHAIRMAN. Do you think it would be advisable to work the farm by the patients with that farm so far away from their own habitations?

Doctor SMITH. No; you would have to put buildings out there to have any satisfaction at all.

Mr. WALLACE. Is your farm, as a whole, profitable, Doctor?

Doctor SMITH. It is. Aside from its being profitable, it is occupation and employment for the patients. That is the principal object; but we get returns.

The CHAIRMAN. Do you think that your patients generally are glad to work?

Doctor SMITH. Not always; but that is often remedied by association. We may get some patients that will not work, but by putting them with patients that do work they soon get in the habit of doing work themselves. We give extra diet in the shape of meat—that is, a larger quantity of meat—to what we call the working class. All the housekeeping is really done by patients; all the waiting at the table is done by patients.

The CHAIRMAN. I wish you would describe the dining-room arrangement. You accommodate how many in your largest dining room?

Doctor SMITH. One thousand patients. There are 1,200 in that dining room; 600 on each side.

The CHAIRMAN. How are the tables arranged?

Doctor SMITH. They are arranged in lines. Each table will seat 8 persons, and there are 4 rows of tables.

The CHAIRMAN. And how is the food served?

Doctor SMITH. The food is brought direct from the kitchen. The kitchen is really part of the dining room—that is, near to the dining room—so the food is taken directly from the range and placed on wagons. The food is divided into dishes for each table; the quantity for each table is placed on this rubber-tired wagon with two shelves to it. There are the meats and vegetables (the day you were there we had soup); and there will be enough soup tureens to cover the number of tables. Patients bring this wagon in and go down the aisle, and there is a monitor seated at each table, who takes the supply for his table and serves it.

The CHAIRMAN. Do you frequently have trouble with the patients at that time—with the monitors, I mean? Do they sometimes break loose?

Doctor SMITH. Once in a great while; but it is rather rare. The attendants simply stand there ready in case there is any break in the system or any patient becomes excited. If the mind of a patient becomes excited he is taken out at once, before he disturbs the other 600. All the attendants are there simply to watch during that service; one-half at their meals and the other half in the dining room.

Mr. WALLACE. Right in that connection, Doctor, how long do you estimate it took from the time they started with the food from the kitchen to serve all that 1,200?

Doctor SMITH. Less than three minutes, and it was steaming hot. Of course, the conditions and the arrangement of the dining room with the kitchen are good. That is a good arrangement where you have a large number of patients.

The CHAIRMAN. Now, Doctor, in regard to the amusements. You talked to me about them when I was up there.

Doctor SMITH. We have an amusement hall; we have theatrical entertainments in winter. We have a band and an orchestra connected with the hospital. We have weekly dances and concerts on the wards. In the summer months we have field days, and baseball Saturday afternoons. The band is composed of employees, who are paid extra for it.

The CHAIRMAN. Do the patients ever play in the band?

Doctor SMITH. Yes; I have one who plays in the orchestra.

The CHAIRMAN. How do you use the band?

Doctor SMITH. We use the band in the summer months to give outside concerts; and Sunday afternoon we have a general review of the patients, and they go out and exercise, and we have the band there to give the music.

The CHAIRMAN. They play during dinner, don't they?

Doctor SMITH. While they are dining the orchestra plays. Usually they alternate in the different dining rooms on different Sundays.

Mr. WALLACE. Doctor, just describe what you call a field day.

Doctor SMITH. You noticed the athletic grounds there?

Mr. WALLACE. Yes.

Doctor SMITH. Now, on that field day we have running, jumping, sack races, wheelbarrow races, and all athletic games, and generally end up with a baseball match. Sometimes these matches are between patients. We give out prizes; everybody gets a prize who takes part.

The prizes consist of suspenders and neckties. We have music and lemonade and crackers. We will seat out there about 2,000 patients; and they enjoy it very much.

Mr. WALLACE. Had you visited St. Elizabeth prior to yesterday—at any time?

Doctor SMITH. Yes, sir; three years ago.

The CHAIRMAN. Doctor, what do you manufacture at your institution?

Doctor SMITH. All our clothing and some of the shoes, not all of them; brooms, brushes, mats, bedding—everything except blankets: we buy those. We get all our cloth and cut it ourselves.

The CHAIRMAN. Then you keep a regular storehouse, I suppose, for all the supplies?

Doctor SMITH. Yes. We make part of our shoes; we can't keep up with that. It is hard to get patients who are good shoemakers, and when you do get a good one, he is such a bad patient that you don't dare to trust him with a knife.

The CHAIRMAN. How often does your board of managers visit the institution?

Doctor SMITH. They hold a regular monthly meeting, and then make individual visits separately during the month.

The CHAIRMAN. Well, are these visits made at fixed times?

Doctor SMITH. Their regular meetings are, but not otherwise; they come unexpectedly.

The CHAIRMAN. How many are there in your board of managers?

Doctor SMITH. Seven; five men and two women.

The CHAIRMAN. Doctor, have you female attendants with your male patients?

Doctor SMITH. In some of the wards; yes, sir.

The CHAIRMAN. Have you a woman doctor?

Doctor SMITH. One.

The CHAIRMAN. Do you approve of the use of the woman nurse for the male patients?

Doctor SMITH. I do.

Mr. SMYSER. Doctor, the per capita in your institution is about \$161, isn't it?

Doctor SMITH. Nearly \$162.

Mr. SMYSER. Now, you have about 3,900 patients. Out here the per capita is about \$220. Does it occur to you that that institution could be run more economically?

Doctor SMITH. Well, I am unable to answer that; I don't know the conditions in the matter of purchase of supplies, etc. I know that the doctor would require really more help than I would require, because he can not get the work done, on account of the conditions, that I can. The fact that I can get more work out of the patients relieves me of some expense.

The CHAIRMAN. You have a separate amusement hall, haven't you?

Doctor SMITH. Yes.

The CHAIRMAN. Now, St. Elizabeth has not a separate music hall, I think.

Doctor SMITH. No, I believe not.

The CHAIRMAN. The doctor tells me there is one appropriated for. That you consider quite important, do you not; in fact you consider the question of the amusement of the patient as one of the most important things?



Doctor SMITH. Yes, I do. It is just as necessary as a drug store.

Mr. SMYSER. Do you have occasional complaints made of maltreatment of patients?

Doctor SMITH. Yes, sir.

Mr. SMYSER. That happens in any institution, I take it.

Doctor SMITH. Where there are insane; yes, sir.

Mr. SMYSER. Well, even where they are not supposed to be so much insane.

Doctor SMITH. Well, that is true.

Mr. SMYSER. If incidents of that kind occur at St. Elizabeth, they are not particularly confined to that institution; that is true the world over.

Doctor SMITH. The world over.

Mr. SMYSER. Has there been improvement in these institutions by way of dispensing with means of restraint?

Doctor SMITH. Yes, there has. I have been connected with such institutions for twenty-three years, and I remember all the forms of restraint. They are reduced now to almost nil, I might say. I only saw one case under restraint at the hospital yesterday, and I think that was justifiable.

Mr. SMYSER. For the good of the patient as well as the other patients with whom he came in contact?

Doctor SMITH. Yes, and everybody else surrounding him.

Mr. SMYSER. Now, take the instance that you saw there; did you regard that as cruel or inhuman?

Doctor SMITH. No, I did not.

Mr. SMYSER. You regarded it as the converse of that?

Doctor SMITH. Yes; I think so in his case. That man was like an animal. He could not appreciate that he was being treated cruelly. And I noticed that he had movement of his hands; he could move his hands back and forth.

Mr. SMYSER. He could do no violence to any one else?

Doctor SMITH. He could do no violence to any one else, which I think he would if he had been let loose. I would not want to be around him. We had a case right in Matteawan, not long ago, of a nurse being killed. That man was a powerful man; it would take 10 men to hold him. I don't believe 10 men could hold that man.

Mr. SMYSER. So you have got to restrain that sort of patient?

Doctor SMITH. Yes.

Mr. SMYSER. Either in that way or by manual effort?

Doctor SMITH. Yes.

Mr. SMYSER. Or by drugs, I suppose?

Doctor SMITH. Yes; that is an individual case. I think that is preferable to the drug.

Mr. SMYSER. Well, do you regard it as preferable to manual restraint?

Doctor SMITH. Yes, certainly. That is an individual case. You have got to treat cases individually, you know. That is a very dangerous man in every way. You could see it.

Mr. WALLACE. Doctor, in your institution is it permissible under any circumstances to strike a patient?

Doctor SMITH. No; unless it is in self-defense. When a man is alone with a patient, and the patient attacks him, and that is the only

means he has to defend himself, I think it is justifiable. But the object of an institution is to prevent such situations.

Mr. WALLACE. There are very few occurrences of that sort in your institution, are there not?

Doctor SMITH. Well, we have had cases where a man has run after an attendant with a mattox, and he would certainly have killed him if he had hit him. The attendant fell down and let the patient fall right over him; then jumped on him. I consider that justifiable. Of course, help came right away, and the man was not injured. You don't expect these attendants to be martyrs, you know.

Mr. SMYSER. Well, they have got that idea in some places.

Doctor SMITH. You notice that they don't report cases where attendants get hurt. I have an attendant with a broken leg, and I have another one (that was only last week) whose face was all cut open by a patient. Those cases don't come out in the papers.

Mr. SMYSER. How do you account for that?

Doctor SMITH. I don't know. There have been one or two doctors shot and that is never noticed at all.

Mr. SMYSER. I thought maybe the doctor would tell how that happened.

Doctor SMITH. It is the Dougherty case, over in Brooklyn. It was taken out on the trial by jury. He got a writ of habeas corpus and was tried by a jury and discharged, and next day he came back and tried to shoot the superintendent, but he was out, and he shot the assistant superintendent. He is now up in Matteawan. There is a case of one of these trials by jury.

Mr. SMYSER. He was discharged?

Doctor SMITH. Discharged by the jury.

Mr. SMYSER. From your observation at St. Elizabeth is it your judgment that this institution, under the superintendency of Doctor White, is being managed up to the standard of similar institutions throughout the country?

Doctor SMITH. Well, when you say "similar institutions throughout the country," I limit myself to institutions in New York State, which I know most about. I think it is, as I said before. I think his object is to bring it up to the standard.

Mr. SMYSER. Do you regard him as a progressive man?

Doctor SMITH. I do; keeping right up to date. That is the trouble; it is hard to change old people around to new ideas. Then, when you get rid of your deadwood, the deadwood is so rotten that sometimes it smells bad afterwards, and it comes back on you.

The CHAIRMAN. I guess that is all, Doctor, unless there is something that you would like to say.

Doctor SMITH. No.

Mr. SMYSER. Did you examine the dietary at St. Elizabeth?

Doctor SMITH. I did not examine the entire dietary, but I saw the food as it was being cooked, and tasted it. It was good.

Mr. SMYSER. What do you say as to oleomargarine; is that healthful and nutritious?

Doctor SMITH. I don't know anything about oleomargarine. It may be a matter of sentiment.

Mr. SMYSER. You stick to the old-fashioned butter in New York.

Doctor SMITH. Yes.

Mr. SMYSER. There is a law of the State barring it?

Doctor SMITH. Yes. It may be only a matter of sentiment. If this oleomargarine is made properly—

Mr. SMYSER. The oleomargarine that they use here is made in Ohio.

Doctor SMITH. Well, probably it is made properly.

Mr. SMYSER. You are restricted by law in that regard?

Doctor SMITH. Yes, we are restricted by law.

The CHAIRMAN. Do you have any trouble in getting good butter?

Doctor SMITH. No trouble at all.

#### **ADDITIONAL STATEMENT OF DR. WILLIAM MABON.**

Dr. WILLIAM MABON, who had been previously sworn, was recalled and testified as follows:

The CHAIRMAN. Doctor Mabon, there is one question that I omitted to ask you. I wanted to have your views in regard to the propriety of having a large number of smaller institutions rather than larger ones?

Doctor MABON. I think that, after all, we have to consider the patient. Everything comes back to the patient, whether or not it is for his best interests. I think the patient is better off in a large institution, properly arranged and properly classified, than he is in a small institution. In the small institution there is a small staff; in the large institution there is a large staff. The patient, therefore, gets the benefit of the medical judgment of a large number of men, and has more stimulus to be progressive than in a small institution, where he is more apt to get into a rut. Therefore I should say that the large institution is preferable, if it is properly organized. I know that I differ from a great many people in that regard, but from my experience I feel that better work is being done in the larger institutions.

Mr. SMYSER. Doctor Smith, I saw you nodding then; are those your sentiments?

Doctor SMITH. They are my sentiments.

#### **TESTIMONY OF JAMES MACGREGOR SMITH.**

JAMES MACGREGOR SMITH, being duly sworn, was examined and testified as follows:

The CHAIRMAN. Mr. Smith, you are a lawyer practicing in New York, are you not?

Mr. SMITH. I am.

The CHAIRMAN. Have you any official position under the State government of New York?

Mr. SMITH. I am the president of the board of managers of the Central Islip State Hospital.

The CHAIRMAN. How long have you occupied that position?

Mr. SMITH. About a year and a half; since the creation of that board.

The CHAIRMAN. And previous to that time you had another position, did you not?

Mr. SMITH. Prior to that time I was president of the State board of visitation for the Manhattan State Hospital, which included the two hospitals on Wards Island—they were then two—and the hospital at Central Islip. I held this position for three or four years.

The CHAIRMAN. The hospitals of which Doctor Mabon and Doctor Smith, respectively, are superintendents?

Mr. SMITH. Yes, sir.

The CHAIRMAN. You have frequently visited both of those institutions, have you not?

Mr. SMITH. Very often.

The CHAIRMAN. Have you visited other institutions?

Mr. SMITH. Yes, a number of the State hospitals in New York.

The CHAIRMAN. Have you visited St. Elizabeth?

Mr. SMITH. I was there yesterday with Doctor Mabon and Doctor Smith; I went around wherever they went.

The CHAIRMAN. From the examination which you made of St. Elizabeth yesterday, and from the general appearance of it, how do you think it compares with the institutions with which you are most familiar in New York State?

Mr. SMITH. Well, there are two parts of it. The old buildings are considerably out of date, and are in process of renovation. Possibly when the work of repair and reconstruction that is now underway is completed, they may be—probably will be—quite up to the standard. The new buildings are the finest I have ever seen in an insane hospital. I think the old kitchens are rather inadequate, both in size and equipment. The bakeries seem to me to be too small and cluttered up. The new buildings are very high class in every way.

The CHAIRMAN. As far as you could judge, what did you think of the arrangement of the scientific appliances?

Mr. SMITH. They seem to have everything that I have been led to understand are necessary in the operation of a hospital, and the equipment seems to be of a very high class.

Mr. SMYSER. Were you in that beautiful operating room where they chop people up?

Mr. SMITH. I was.

The CHAIRMAN. You think that is beautiful, do you? [Laughter.]

Mr. SMITH. Well, I think that a surgeon would call it beautiful.

The CHAIRMAN. Mr. Smith, you know something in regard to the commitment of the insane in the State, do you not?

Mr. SMITH. In a general way.

The CHAIRMAN. What do you think of the propriety of a jury trial in every case?

Mr. SMITH. I do not think it is necessary or desirable. We have in the State of New York a paper which I think is usually called the "commitment," although I should hardly call that a proper term. It is signed by a judge of a court of record, approving the determination of two physicians who have qualified and registered as examiners in lunacy. It is a document that merely has the effect of protecting the superintendent of the institution from an action for false imprisonment. It does not adjudicate the lunacy of the patient, or amount to an adjudication in the nature of a commitment. That question can be tried at any time. On return of a writ of habeas corpus that would merely create a presumption, I believe, as to the insanity of the patient, which could be rebutted. In ninety-nine cases out of a hundred I think that is as far as the matter ever goes. Particularly in cases of comparatively friendless, homeless people, who have no property interests, I do not think that ordinarily there is ever any adjudication in lunacy, or the appointment of a committee, because there is no necessity for it.

The CHAIRMAN. The writ of habeas corpus would be granted almost as a matter of course, upon presentation of a proper petition, would it not?

Mr. SMITH. A writ of habeas corpus must be granted. I think there is a penalty of a thousand dollars on a judge who refuses a writ of habeas corpus.

The CHAIRMAN. And that would necessitate a jury trial?

Mr. SMITH. Well, that would depend upon the issue offered you.

The CHAIRMAN. Does the judge have discretion as to a jury trial, or can he send it to a reference?

Mr. SMITH. I don't think that the jury trial is absolutely necessary in those cases.

The CHAIRMAN. Now, Mr. Smith, there is one step in the commitment that I think you did not mention. How is the matter first brought to the attention of the judge of the court of record—by petition of a next friend, or something of that kind?

Mr. SMITH. Yes; there is a petition. I think it is usually by a relative. As to these derelicts who drift into Bellevue, my impression is that that is made by someone in connection with the Bellevue Hospital. Doctor Mabon will know about that.

Doctor MABON. That is made by a representative of the commissioner of charities, who acts as superintendent of poor. The poor authorities in every county or town have the right to make petition as well as a relative.

The CHAIRMAN. Does the superintendent of charities in the city of New York have any jurisdiction over these two hospitals that we have been hearing about?

Mr. SMITH. Oh, no; but he has over Bellevue Hospital. Bellevue Hospital is really the feeder for both Wards Island and Central Islip.

The CHAIRMAN. In other words, friendless and homeless people are taken to Bellevue, and if the doctors upon examination consider that they are mentally disturbed, the board of charities makes the proper petition, and the commitment has to be signed by the judge in the same manner as the petition by a next friend?

Mr. SMITH. Exactly. There are two ways of getting a patient to Bellevue Hospital. One is by the patient going there or being sent there by the commissioner of charities; second, by the magistrate committing him after an examination into his mental condition.

The CHAIRMAN. Mr. Smith, did you look at the food supply that was being served to the patients at St. Elizabeth?

Mr. SMITH. Yes; I saw yesterday's dinner.

The CHAIRMAN. How did you think that compared with that at Islip and Wards Island?

Mr. SMITH. It was a thoroughly good dinner. They had some soup, corned beef and cabbage, and very good bread. The quality of all those things seemed to be very good. We looked at them closely. I don't know that I would admit that it was quite as good as Central Islip [laughter], but I don't know that I could be expected to.

The CHAIRMAN. Mr. Smith, go back to that matter of commitments. The petition which has to precede the application to the court is accompanied by the certificates of these two physicians, and the petition has to state the facts sufficiently to show that the patient is dangerous, either to himself or to others, does it not?

Mr. SMITH. Unquestionably. The whole theory of the proceeding is, Here is a man who requires custodial care; he is a menace to the community; and, as I take it, this extraordinary process, which is issued without an adjudication, is based upon the same theory on which a peace officer can, without a warrant, arrest a man who has committed a felony. It is a sort of preliminary authority to the superintendent of this institution to hold that dangerous man and keep him from being at large. As a matter of fact, in the large majority of cases, that is the only judicial action that ever is taken, for the simple reason that no other action is necessary. But it can be taken.

The CHAIRMAN. Now, Mr. Smith, there is another question I would like to ask you. From your knowledge of public institutions and of private institutions, do you not think that the public institution gives as good care to the patient as the average private institution?

Mr. SMITH. My experience has been that in the State hospitals of New York a patient receives the highest grade of medical care, and ordinary living and surroundings that in the large majority of cases are fully up to the appreciation of the patient. Of course, a man reared elegantly and expensively would miss some of the things that he had become accustomed to; but in the ordinary system of classification I think that there is very little that is offensive or objectionable, even to the man who has lived quite decently and well.

The CHAIRMAN. What was your feeling in regard to the general appearance of patients and attendants in St. Elizabeth as compared with the institutions with which you are particularly familiar?

Mr. SMITH. I didn't see much difference. I think that in some ways you have perhaps a little better class of patients—I mean socially better—here than we have in Central Islip, and that fact was indicated to some extent by their appearance as I saw them in the different wards. The convict class we have nothing similar to. Although we have perhaps individual cases of men almost—not quite—as bad as they are, we haven't any entire ward that has to be devoted to that class of patients.

The CHAIRMAN. I think that is all, Mr. Smith, unless there is some statement that you would like to make.

Mr. SMITH. The only suggestion that I would make, and which occurred to me yesterday, is that the superintendent at St. Elizabeth is charged with certain duties and responsibilities that might better be performed by a steward, such as we have in New York State, and by some person who might be called a treasurer or disbursing officer, or some one who could relieve him from a great deal of detail clerical work. I think that the superintendent of so large an institution might be better employed, for the welfare of the patients of the institution, than in attending to those clerical matters.

The CHAIRMAN. But your idea is that such official should be under the superintendent?

Mr. SMITH. I think so; yes. I don't think it should be necessary for him to write his own name to everything. There should be some substitute; and I think that, as I understand the situation, a good deal of work is done by the superintendent here personally that might be just as well performed by a steward who is responsible to him.

The committee thereupon adjourned at 12.55 p. m., subject to the call of the chairman.

## EXHIBIT—REYBURN, No. 1.

WASHINGTON, July 27, 1905.

DEAR DOCTOR WHITE: Thank you for your note. I am sorry for the annoyance that you are compelled to endure from the misrepresentations at the City Hall. It calls for all of your philosophy.

This morning my neighbor, Dr. Robert Reyburn, an excellent man, came to me much disturbed by statements made to him by a man whose name he gave me on inclosed slip. The man, a former patient at St. Elizabeth, had been shamefully maltreated and beaten by attendants, his ear showing marks of abuse, etc. He wanted to have the matter investigated fully. Justice should be done, and the rest of it.

I told him that I could relieve his anxious mind by the assurance that it would be investigated, but he might feel certain that the statement was false. Attendants did not beat patients at St. Elizabeth, for that was the unpardonable sin at the institution, as everyone there knew, involving immediate discharge and delivery to the police.

However, I send the name to you, and I will inform the anxious doctor of your reply, duly.

I leave to-morrow for short stay at Hotel Savoy, Atlantic City, for Mrs. Gunnell's benefit.

Yours, cordially,

F. M. GUNNELL.

In re Oscar Hoffman.

JULY 28, 1905.

Dr. F. M. GUNNELL,

*No. 600 Twentieth Street NW., Washington, D. C.*

DEAR DOCTOR GUNNELL: I am in receipt of your letter of the 27th instant. The patient to whom you refer is known to us as Oscar Hoffman. He was admitted to this hospital on the 8th day of March, 1903, and resided here until December 12, 1903, when he was discharged as recovered.

During his residence here he suffered from mania-depressive insanity. The history received with him shows that he had homicidal tendencies, and while in the hospital he was generally excited and disturbed. At times he was very incoherent in conversation and nothing of an intelligent nature could be gotten from the patient. He would slam the doors, walk the floor, talk loudly, take his bed apart, break window panes, throw himself on the floor, would tear the clothing off himself, also tear the clothing off of the attendants. He, for a long while, refused to take any nourishment, and had to be fed with a tube. Sometimes he had to be held in order to prevent him from injuring himself or others. He made attacks from time to time on the attendants. Owing to his condition of excitement and delirium he was not at times able to recognize his own mother. He had from time to time, as a natural result of his own conduct and actions, bruises of one kind or another, but none of a serious nature.

On July 6, 1903, he attempted to make his escape several times from the ward by running down the steps. It happened on one of the occasions while running down stairs that he slipped and fell, resulting in an injury to his shoulder. It is also likely that other minor injuries resulted from this same escapade, as he had shortly thereafter a swollen jaw, which was thought to be due to a decayed tooth, but which cleared

up promptly within a few days. These injuries are, I think, the ones to which the patient refers. They occurred a short time prior to my assuming control of the institution, and one of the first callers that I had after my advent here was Mrs. Hoffman, the mother of the boy, who requested that I make a careful investigation into all the circumstances concerning his injuries. She complained to me that he had been severely beaten and that he was black and blue. I made a special investigation, visited the young man, who was then located at the Toner Building, and had a talk with him, but he refused to tell me whether or not he had been injured or to discuss the names of the attendants inflicting the injury. Not altogether satisfied with this, I had the patient stripped and personally examined his body and found that he did not have a single bruise upon him.

Doctor Logie, who was caring for him then, told me that the mother had made frequent complaints and that he had always found them groundless. It appears that she formed the conclusion that her son had been beaten because of having been so told by another visitor to the hospital. Without entering into any specific statement regarding this woman who informed Mrs. Hoffman of the mistreatment of her son, I shall only say that for a considerable period of time she thought that the institution was badly managed and that much abuse existed, and in a number of instances she has caused a great deal of worry and anxiety to the friends and relatives of the patients by making, purposely, erroneous and misleading statements. This woman's husband continues to reside at the hospital, and for the past year or so she has found it convenient to annoy no one.

In regard to the mother of Mr. Hoffman, I desire to say that she is a peculiar individual. She not only is down on those who with such great patience and caution cared for an exceedingly troublesome patient, but she always took occasion to berate the authorities in the city for sending her son here; also the minister of her church, together with a number of her neighbors, who were all in sympathy with her in her trouble, incurred her great enmity and displeasure. She had many peculiar ideas; was very unreasonable and excitable at times. When one of our patients died who was located in the same ward with Mr. Hoffman, his mother, before the interment of the remains, addressed a long letter to the wife requesting her to give \$10,000 to her son and to pay \$5,000 at once on account.

I only speak of these things in order to give you some idea of the disadvantages of the suspicion, the lack of confidence under which we labor in treating this case. I think it would be thoroughly unjust on such a lack of evidence as we have to in any way admit for a moment that the patient had been abused.

Very respectfully,

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*Superintendent.*



## EXHIBIT—QUAID, No. 1.

[Form No. 1069.]

## UNITED STATES CIVIL SERVICE COMMISSION.

## APPLICATION FOR THE POSITION OF ATTENDANT IN THE GOVERNMENT HOSPITAL FOR THE INSANE.

**NOTE.**—Applicants will be rated on the various features and general character of this application if an average of 70 per cent or more is attained they will then be eligible for appointment, subject to such further tests as the superintendent may deem necessary to determine whether mental or physical deficiencies exist which would prevent the proper performance of the duties of an attendant.

**N. B.**—All answers must be in ink, the application in the handwriting of the applicant, and each voucher in the handwriting of the signer thereof. There must be no discrepancy in the name of the applicant in any part of the application or in the vouchers. Applications or vouchers which are executed or dated more than six months before the date of filing will not be accepted.

## UNITED STATES CIVIL SERVICE COMMISSION:

I, the undersigned, hereby apply for appointment as attendant in the Government Hospital for the Insane.

[Fill in the following blanks with utmost care.]

1. (a) Are you—

Single.	Married.	Widow.	Widower.	Divorced.

(b) Have you any children or other persons to support? If so, state who they are .....  
(In making appointments, preference will be given single persons.)

2. What schools have you attended and for how long? What studies have you pursued?

3. Describe your occupation since leaving school, giving place and kind of occupation each year in regular order.

4. (a) Where were you born and on what date? (b) Are you a citizen of the United States? (If foreign born your naturalization papers or the naturalization papers of one of your parents, if such parent was naturalized while you were a minor, with sworn statements of two disinterested persons as to the reputed relationship must accompany your application. The certificate will be returned to you.)

(Male attendants are preferred between 20 and 35 years of age. Female attendants should be between 20 and 30 years of age.)

5. (a) Where is your present legal residence? (b) Give your residence each year in regular order since birth.

6. If at any time in Government employ, give dates and kind of service, avoiding reference to politics or change of administration.

7. (a) If ever in military or naval service of the United States give dates and length of service and organizations to which you belonged. (b) State what was the reason for your discharge from the military or naval service.

8. Have you ever been convicted of, or indicted for, any crime, or arrested for any violation of law? If so, give particulars.

9. Do you now use, or have you ever used, tobacco, morphine, opium, cocaine, or any narcotics?

10. Do you use intoxicating drinks as a beverage? If so, to what extent?

11. What is your height in your bare feet? — feet — inches.

12. What is your weight in ordinary clothing? — pounds.

13. Have you any defect of either eye? If so, describe it.

14. If you wear glasses, are they used for reading and writing only?

15. Have you any defect of speech? If so, describe it.

16. Have you any disease, bodily malformation, rupture, chronic discharge, or any other serious disability?

17. Have you any defect of hearing?

(Applicants must pass a satisfactory physical examination when presenting themselves for final examination.)

18. If you have had any experience in nursing, either in private or in hospitals, or any experience in the care of the insane, give all particulars, including periods in

each institution, name and address of superintendent, and accompanying application with recommendation from each.

19. What are your future plans in case you are successful in securing this position?

20. Is each of the foregoing answers in your own handwriting and composed unaided by yourself?

(Signature of applicant;) \_\_\_\_\_.

(Sign your first name in full, your middle initial, or initials, if you have any, and your surname in full.)

(P. O. address. Give number, street, city, and State;) \_\_\_\_\_.

(Make exact duplicate of this signature and address on back of application.

### JURAT.

[The following oath must be taken before a notary public, or other officer authorized to administer oaths for general purposes, and the officer's signature must be authenticated by official (impression) seal. If the oath be taken before a justice of the peace or other officer who has no official seal, his official character must be certified by the clerk of court, secretary of state, or other proper officer, under official seal.]

Subscribed and sworn to before me by the above-named applicant, to me personally known, this \_\_\_\_\_ day of \_\_\_\_\_, 190\_\_\_\_, at \_\_\_\_\_, county of \_\_\_\_\_, and State [or Territory or District] of \_\_\_\_\_.

(Signature of officer.)

[OFFICIAL SEAL]

(Official title.)

The official seal must not be omitted.

Every applicant for examination before the United States Civil Service Commission must furnish the vouchers of two citizens of the United States, each of whom must be at least 21 years of age; must have known the applicant for six months or more, and *must be a legal resident of and must actually reside in the State of which the applicant is a legal resident.* No person can sign more than one voucher. Vouchers will not be accepted from the father, mother, sister, brother, husband, wife or child of the applicant, and not more than one voucher will be accepted from a relative of a more remote degree. *No recommendations other than those provided for hereon will be accepted by the Commission.*

### VOUCHER NO. 1.

[All answers must be in ink and in the handwriting of the signer.]

1. What is your own age? (Age of voucher, not applicant, is wanted.) \_\_\_\_\_ years.
2. What is your actual bona fide (legal) residence? State, \_\_\_\_\_.
3. How long have you been such resident thereof? \_\_\_\_\_ years.
4. How long have you been personally acquainted with the applicant? \_\_\_\_\_ years.
5. Are you related to the applicant? If so, what is the relationship?
6. Is the applicant addicted to the use of intoxicating beverages, tobacco, morphine, opium, cocaine, or other narcotics? If so, to which?
7. Has the applicant ever been addicted to the use of the articles named in question 6? If so, to which?
8. Does the applicant use profane, vulgar, or coarse language?
9. Are you aware of any circumstances tending to disqualify the applicant for the public service?
10. What is the applicant's reputation and standing in the community in which he lives?
11. Would you yourself trust the applicant with the performance of duty requiring good moral character and undoubted honesty?
12. Would you yourself trust the applicant with the performance of duty requiring physical strength and endurance?
13. Would you yourself trust the applicant with the performance of duty requiring he possession of a kindly and at the same time firm disposition and the exercise of sound judgment and discretion?
14. What experience has the applicant had which, in your opinion, especially fits

him for the position for which he has applied? State the character and length of experience.

15. Of what State or Territory is the applicant an actual bona fide (legal) resident? How long has the applicant been such resident thereof? — years, — months.

16. Of what county or parish is the applicant such resident? How long has the applicant been a resident thereof? — years, — months.

17. What is the name of the applicant for whom you furnish this certificate? (First name, middle initial or initials, if he has any, and last name should be correctly given.)

18. In the blank space below give any additional facts which will tend to show the fitness or unfitness of the applicant for the position which he seeks.

19. Are the answers to the foregoing questions based upon your personal knowledge of the applicant?

20. Are each and all of the answers to the foregoing questions in your own handwriting?

Date, ———, 190—.

\_\_\_\_\_,  
(Signature of voucher.)

\_\_\_\_\_,  
(Post-office address.)

### VOUCHER NO. 2.

[All answers must be in ink and in the handwriting of the signer.]

1. What is your own age? (Age of voucher, not applicant, is wanted.) — years.
2. What is your occupation?
3. What is your actual, bona fide (legal) residence? State —.
4. How long have you been such resident thereof? — years.
5. How long have you been acquainted with the applicant? — years.
6. Are you related to the applicant? If so, what is the relationship?
7. To your knowledge is the applicant addicted to the use of intoxicating beverages, tobacco, morphine, opium, cocaine, or other narcotics? If so, to which?
8. To your knowledge has the applicant ever been addicted to the use of the articles named in question 7? If so, to which?
9. Does the applicant use profane, vulgar, or coarse language?
10. Are you aware of any circumstances tending to disqualify the applicant for the public service?
11. What is the applicant's reputation and standing in the community in which he lives?
12. Would you yourself trust the applicant with the performance of duty requiring good moral character and undoubted honesty?
13. Would you yourself trust the applicant with the performance of duty requiring physical strength and endurance?
14. Would you yourself trust the applicant with the performance of duty requiring the possession of a kindly, and, at the same time, firm disposition, and the exercise of sound judgment and discretion?
15. What experience has the applicant had, which, in your opinion, especially fits him for the position for which he has applied? State the character and length of experience.
16. Of what State or Territory is the applicant an actual, bona fide (legal) resident? How long, to your knowledge, has the applicant been such resident thereof? — years, — months.
17. Of what county or parish is the applicant such resident? How long, to your knowledge, has the applicant been a resident thereof? — years, — months.
18. What is the name of the applicant for whom you furnish this certificate? (First name, middle initial, or initials, if he has any, and last name should be correctly given.)
19. In the blank space below, give any additional facts which will tend to show the fitness or unfitness of the applicant for the position which he seeks.
20. Are each and all of the answers to the foregoing questions in your own handwriting?

Date, ———, 190—.

\_\_\_\_\_,  
(Signature of voucher.)

\_\_\_\_\_,  
(Post-office address.)

[Applicant will not fill the following blanks.]

Final certificate of naturalization of (name of person naturalized), issued by the \_\_\_\_\_ court of (city), (State), on \_\_\_\_\_, 1—, was filed with this application by the applicant, and was found by me to be in due form in all respects. The certificate was returned to the applicant on \_\_\_\_\_, 190—.

[Indorsement.]

(Initials.)

Form No. 1059.—Application No. \_\_\_\_\_.

NOTE.—The applicant will carefully fill all blanks down to the heavy line.

APPLICATION FOR THE POSITION OF ATTENDANT IN THE GOVERNMENT HOSPITAL FOR THE INSANE.

N. B.—Applicant will write plainly his full name (and if a woman, whether Miss or Mrs.) and post office address in the blanks below. The address here given will be treated as the applicant's post office address until notification of change is made to the Commission in writing.

Name of applicant, \_\_\_\_\_. Number and street, \_\_\_\_\_. Post-office, \_\_\_\_\_. County of \_\_\_\_\_. State or Territory, \_\_\_\_\_.

[Applicant will not fill the following blanks.]

State, \_\_\_\_\_. Age, \_\_\_\_\_. Education, \_\_\_\_\_. Application approved, \_\_\_\_\_, 190—. By whom approved, \_\_\_\_\_. Notified of approval, \_\_\_\_\_, 190—. Entered register, \_\_\_\_\_, 190—.

*Qualifications.*

Elements.	Marks.	Relative weights.	Products of marks by weights.
1. Age.....		1	.....
2. Special qualifications and ability.....		3	.....
3. Experience.....		1	.....
4. Physical condition.....		5	.....
		10	.....
General average.....			.....

EXHIBIT—OFFUTT, No. 1.

[Proposals must be made and signed in duplicate.]

PROPOSAL.—SUPPLIES FOR THE GOVERNMENT HOSPITAL FOR THE INSANE.

\_\_\_\_\_,  
\_\_\_\_\_, 1906.

To the SECRETARY OF THE INTERIOR.

SIR: The undersigned, \_\_\_\_\_, propose to furnish to the Department of the Interior, for the use of the Government Hospital for the Insane, during the fiscal year ending June 30, 1907, in compliance with the terms of the specifications hereto attached, all the conditions of which are hereby made a part of this proposal, any or all of the articles named in the accompanying schedule opposite which prices have been affixed, at the rates therein stated, to be delivered at the Government Hospital for the Insane, near Washington, D. C.

The right is accorded to the Department to order a greater or less quantity of any or of all the articles embraced in this proposal as may be required.

Respectfully,

\_\_\_\_\_,  
\_\_\_\_\_,  
\_\_\_\_\_,  
\_\_\_\_\_.

Doing business as \_\_\_\_\_.

[Signature of each member of the firm and firm name. If a corporation, its name, and signature of the officer authorized to sign for the corporation, together with a copy, under seal, of his authority to sign.]

Names of individual members of firm: \_\_\_\_\_.

Name of corporation: \_\_\_\_\_.

Name of president: \_\_\_\_\_.

Name of secretary: \_\_\_\_\_.

Under what law corporation is organized: \_\_\_\_\_.

#### GUARANTY.

[NOTE.—If preferred, a certified check may be submitted with bid in lieu of this guaranty. See page 3 of specifications.]

We, \_\_\_\_\_, for value received, hereby guarantee and bind ourselves and each of us, our and each of our heirs, executors, administrators, and assigns, in the event that a contract for furnishing supplies for the Government Hospital for the Insane, according to the advertisement and specifications of March 8, 1906, shall be awarded to \_\_\_\_\_; that he, the said \_\_\_\_\_, will, within the time limited by the specifications, enter into and duly execute, as required by the said specifications, a contract accordingly, and this guaranty is based upon and governed by the said specifications as to its scope and extent; and in case of failure of the said \_\_\_\_\_ to enter into contract as above, that we will forfeit and pay to the United States the sum of <sup>a</sup> \_\_\_\_\_ dollars (\$ \_\_\_\_\_), for which forfeiture we will be jointly and severally liable as fixed and settled damages, and not as a penalty to be reduced or diminished.

Dated at \_\_\_\_\_, 1906.

Signatures of guarantors:

\_\_\_\_\_,  
(Post-office address:) \_\_\_\_\_.

\_\_\_\_\_,  
(Post-office address:) \_\_\_\_\_.

#### CERTIFICATE.

The undersigned, \_\_\_\_\_, in the State of \_\_\_\_\_, certifies that he is acquainted with the above guarantors and knows them to be citizens of the United States, men of property, and able to make good their guaranty.

Dated at \_\_\_\_\_, 1906.

b. \_\_\_\_\_,  
(Official character:) \_\_\_\_\_.

<sup>a</sup> \$250 for each bid of \$1,000 or less; \$500 for each bid exceeding \$1,000 and not exceeding \$5,000; \$1,000 for each bid exceeding \$5,000 and not exceeding \$10,000; \$3,000 for each bid exceeding \$10,000.

<sup>b</sup> This certificate must be signed by the postmaster, United States judge, United States attorney, United States commissioner, United States collector of internal revenue, or the clerk of a court of record at or nearest the place of residence of the bidder.

## SPECIFICATIONS FOR SUPPLIES FOR THE GOVERNMENT HOSPITAL FOR THE INSANE.

DEPARTMENT OF THE INTERIOR,  
*Washington, D. C., March 8, 1906.*

Sealed proposals to furnish such miscellaneous supplies as may be required by the Government Hospital for the Insane during the fiscal year ending June 30, 1907, will be received until 2 o'clock p. m., Friday, April 20, 1906, and be opened immediately thereafter in the presence of such bidders as may attend.

## PROPOSAL—GUARANTY.

Proposals must be made in duplicate, on the forms furnished by the Department, and must be signed by the individual or partnership making same; when made by a partnership, the name of each partner must be signed. If made by a corporation, proposals must be signed by the officer thereof authorized to bind it by contract, and be accompanied with a copy, under seal, of his authority to sign.

Except where "price lists" are called for, the price of articles must in all cases be entered on the schedule without referring to marks on samples.

Each proposal must be accompanied with a guaranty, signed by at least two responsible guarantors, that the bidder shall, within ten days after being called upon to do so, execute a contract in accordance with the terms of his proposal, and give a bond for the faithful performance thereof, with good and sufficient sureties as hereinafter required. The responsibility and sufficiency of the signers of such guaranty to be certified to by the postmaster, United States attorney, United States judge, or the clerk of the court of record at or nearest to the place of residence of the bidder. The guaranty must be in a penal sum of \$250 if the value of the articles embraced in the proposal is \$1,000 or less; of \$500 for a bid of more than \$1,000 and not exceeding \$5,000; of \$1,000 for a bid of more than \$5,000 and not exceeding \$10,000; and of \$3,000 for a bid of over \$10,000. If preferred, a certified check for like amounts, payable to the order of the Secretary of the Interior, may be filed in lieu of guaranty, the amount of said check to be forfeited to the Government in event of failure on the part of the bidder to enter into contract in accordance with the proposal. If the amount of the bid is not greater than \$250, a certified check for a sum equal to 20 per cent of said amount may be submitted in lieu of guaranty bond.

## QUANTITY AND QUALITY OF ARTICLES.

The quantities given in the schedule are the estimated requirements for the fiscal year ending June 30, 1907, but it is to be distinctly understood that these estimates are given for information only, and no obligation is imposed thereby, the right being reserved to order any greater or any less quantity, as the interests of the service may require.

All articles must be of the best quality unless otherwise specified.

The fresh beef must be all native bullock meat, best in quality and condition, fit for immediate use, and from fore and hind quarter meat proportionately. Sides to weigh not less than three hundred and twenty-five (325) nor more than three hundred and seventy-five (375)

pounds. Necks must be cut off at fourth vertebral joint, and the breasts trimmed down; shanks of fore quarters must be cut off at four inches above the kneejoint and of hind quarters eight inches above the hock joint. Necks, shanks, and kidney tallow to be excluded from delivery as well as meat from bulls, stags, and diseased cattle.

The fresh mutton must be good, fat, and marketable, from wethers over one and under three years old. The carcasses must be trimmed as follows, and the average weight in that condition must not be less than forty (40) pounds: The head must be cut off at the first vertebral joint; the shanks of fore quarters at the kneejoint and of hind quarters at the hock joint.

Lamb must be good, fat, and marketable, and not over six months old. The carcasses must be trimmed as follows, and the average weight in that condition must not be less than thirty (30) pounds. The heads must be cut off at the first vertebral joint; the shanks of fore quarters at the kneejoint and of hind quarters at the hock joint.

The bacon must be of first quality, in 5 to 6 pound strips, equally divided between backs and bellies, pieces well trimmed, not too thick, each piece containing a streak of lean and a streak of fat.

The hams must be of the best quality, weighing from eight (8) to fourteen (14) pounds each, averaging ten (10) pounds, neatly and closely trimmed, perfectly cured, slowly and thoroughly smoked; cut short, well rounded at the butt, properly faced, cut just above the hock joint.

The lard must be made solely from the leaf and must be unadulterated, sweet, and good.

The flour must be freshly made, of good, sound wheat, high ground, well dressed, in all respects equal to sample furnished. Samples of not less than five (5) pounds must be furnished by bidders and will be well tested before acceptance.

The sugar must be of good quality, as specified in schedule.

The coffee must be sound and clean, of good quality; samples of not less than one (1) pound must be furnished. Not more than three samples from any one bidder will be tested.

The tea must be of medium quality, clean, and free from adulteration or impurity; samples of sufficient quantity to enable proper test to be made must be furnished. Not more than three samples from any one bidder will be tested.

The rice to be choice Carolina.

The codfish must be in boxes, whole, large, Grand Bank, heads off, and not less than 22 inches in length.

The macaroni must be domestic, Mezzani, in 25-pound boxes, to be made from No. 1 patent spring wheat flour and average 18 inches in length.

Cylinder oil: Base to be of crude petroleum (equal to best West Virginia stock) once filtered and free from asphaltum and other foreign matter, compounded with not less than 5 per cent nor more than 10 per cent pure acidless tallow. Viscosity (to be taken with distilled water 70° F.—50 as standard—Dudley pipette viscosimeter) not less than 200 (212° F.); specific gravity not less than 0.8574 (Baumé); fire test not less than 550° F.; flash test not less than 520° F.

Engine oil to be pure petroleum base (not compounded). Viscosity not less than 200 (70° F.); specific gravity not less than 0.85 (Baumé); fire test not less than 410° F.; flash test not less than 390° F.

## SAMPLES.

Samples must be furnished as required in the schedule. Where the schedule requires that articles shall be "like sample," such samples may be seen at the hospital. A list of the samples submitted must accompany the proposal.

Each sample must be plainly marked with a number corresponding to the number on the schedule of the item to which it relates, the price, and the name of the bidder.

If in any case the samples submitted by the bidder should be superior to the requirements of the specifications, he will be expected and required to furnish goods equal in all respects to his sample, notwithstanding its superiority.

## AWARD.

Bids will be considered on each item separately and contract awarded to the lowest responsible bidder, except where samples are required, when price and quality of sample will be taken into consideration in making the award.

If the bidder to whom the first award may be made should fail to enter into a contract as herein provided, then the award may be annulled and the contract let to the next most desirable bidder in the opinion of the Secretary of the Interior; and such bidder shall be required to fulfill every stipulation embraced herein as if he were the original party to whom the contract was awarded.

None of the contracts can in any case be lawfully transferred or assigned.

Contracts will be awarded only to established manufacturers of or dealers in the articles offered.

The contractors must save, keep, bear harmless, and fully indemnify the United States and any of its officers or agents from all damages or claims for damages, cost, or expenses in law or in equity, that may at any time arise or be set up for any infringement of the patent right of any person or persons in consequence of the use by the Department of the Interior, or by any of its officers or agents, of articles to be supplied under this proposal, and of which the contractor is not the patentee or assignee, or lawfully entitled to sell the same.

No proposal will be considered from any person, firm, or corporation in default in the performance of any contract or agreement made with the Department, or that has failed to perform the same to the satisfaction of the Department, nor will any contract hereafter be awarded to such person, firm, or corporation.

## DELIVERY, INSPECTION, ETC.

Articles furnished under this proposal and contract must be delivered in such quantities as may, from time to time, be ordered by the superintendent of the Hospital for the Insane, to be delivered at the hospital, near Washington, in the usual trade packages, without charge for delivery of packages. Articles marked \* may be delivered in carload lots on hospital switch of B. & O. R. R., if preferred.

Articles must be furnished promptly as ordered. On the failure of the contractor to deliver articles within a reasonable time after they are ordered, and of satisfactory quality, the right is reserved by the



Government to purchase such article in open market, if the exigencies of the service require it, or to declare the contract forfeited; and if a greater price than that of the contract be paid for such articles, the difference in the total amount of the purchase will be charged to the contractor and the sureties on the bond.

Articles will be inspected within a reasonable time after delivery, and if, in the opinion of the superintendent of the hospital or his duly authorized agent, they are not in accordance with the contract requirements, they will be rejected and returned to the contractor at his expense. The decision of the superintendent on this point to be final.

#### CONTRACTOR'S BOND.

Each contractor will be required (in the discretion of the Secretary of the Interior) to give a bond in the sum of at least 50 per cent of the amount of the contract, with two responsible individual sureties or one satisfactory surety company, conditioned upon the faithful performance by the contractor of all the covenants, stipulations, and agreements of the contract on the part of the contractor to be performed as therein set forth.

Individual sureties will be required to justify their responsibility by affidavit, showing that they severally own and possess property of the clear value in the aggregate of double the amount specified in the bond over and above all debts and liabilities and all property by law exempt from execution.

Corporate sureties, before acceptance, must show full compliance with all the requirements of the act of Congress approved August 13, 1894, relating to such corporations.

Corporate sureties on bonds are preferred to individual sureties.

If at any time during the continuance of the contract the sureties, or either of them, shall die, or become irresponsible, the Secretary of the Interior shall have the right to require additional and sufficient sureties, which the contractor shall furnish to the satisfaction of the Secretary of the Interior within ten days after notice, and in default thereof the contract may be annulled.

#### PAYMENTS.

Payments will be made within sixty days by the superintendent of the hospital for such articles as may be delivered in conformity with the contract and accepted, and after proper examination and adjustment of accounts.

Payments may be withheld if it shall appear to the satisfaction of the Secretary of the Interior that the contract has not been complied with in any particular.

#### RESERVATIONS.

The Secretary of the Interior reserves the right to reject any and all bids, to waive technical defects, and to accept any part of any bid and reject the other part, if, in his judgment, the interests of the Government shall require it; also the right to annul any of the contracts, if, in his opinion, there shall be a failure at any time to perform faithfully any of its stipulations, or in case of a willful attempt to impose

upon the Government articles inferior to those required by the contract; and any action taken by the Secretary of the Interior in pursuance of this latter stipulation shall not affect or impair any right or claim of the United States to damages for the breach of any of the covenants of the contract by the contractor.

## ADDRESS OF PROPOSALS.

Proposals must be securely enveloped, sealed, and indorsed (on the envelope) "Proposals for supplies for the Government Hospital for the Insane," and addressed to the Secretary of the Interior, Washington, D. C.

E. A. HITCHCOCK,  
*Secretary of the Interior.*

*Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907.*

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
		<i>Division I.—Meats, provisions, groceries, feed, crockery, etc.</i>			
1	40 pounds.....	Allspice, whole; sample required.....per pound.....			1
2	25,000 pounds.....	Apples, evaporated; sample required.....do.....			2
3	2,000 pounds.....	Beef, dried, in 1-pound cans; sample required, per pound.....			3
4	350,000 pounds.....	Beef, fresh, quarters.....per pound.....			4
5	100,000 pounds.....	Beef, corned, brisket and plate.....do.....			5
6	35,000 pounds.....	Bacon, breakfast.....do.....			6
7	100 tons.....	Bran, weight 20 pounds to the bushel a.....per ton.....			7
8	30 tons.....	Bran, corn a.....do.....			8
9	900 bushels.....	Beans, bush, pea, white; sample required; 60 pounds to bushel, per bushel.....			9
10	100 bushels.....	Beans, red, kidney; sample required; 60 pounds to bushel, per bushel.....			10
11	150 bushels.....	Beans, lima, white; sample required; 60 pounds to bushel, per bushel.....			11
12	2 barrels.....	Brandy, California, in bond; sample required; per proof gallon.....			12
13	4 gross.....	Bath brick.....per gross.....			13
14	150 dozen.....	Brooms, 4-string; sample required.....per dozen.....			14
15	15 dozen.....	Buckets, 3-hoop, riveted ears, not painted inside, per dozen.....			15
16	10 gross.....	Blacking, shoe, small size; state brand; per gross.....			16
17	125 dozen.....	Bowls, soup; sample required.....per dozen.....			17
18	6 dozen.....	Bowls, sugar; sample required.....do.....			18
19	4 dozen.....	Bowls, wash, and pitchers; sample required; per dozen.....			19
20	15,000 pounds.....	Codfish, boneless; state brand.....per pound.....			20
21	500 bushels.....	Corn, white, cracked.....per bushel.....			21
22	200 barrels.....	Corn, ear; sample required; 350 pounds to barrel, per barrel.....			22
23	500 pounds.....	Chocolate, best; state brand.....per pound.....			23
24	1,800 doz. cans.....	Corn, 2-pound cans; state brand; sample required, per dozen cans.....			24
25	25 pounds.....	Cinnamon bark; sample required.....per pound.....			25
26	50 pounds.....	Cinnamon, ground, in 4-pound packages; sample required, per pound.....			26
27	25 pounds.....	Cloves, ground; sample required.....per pound.....			27
28	40 pounds.....	Cloves, whole; sample required.....do.....			28
29	80,000 pounds.....	Crackers, soda; sample required.....do.....			29
30	15,000 pounds.....	Cakes, ginger; sample required.....do.....			30
31	300 pounds.....	Citron, best; sample required.....do.....			31
32	3,500 pounds.....	Currants, best; sample required.....do.....			32
33	70,000 pounds.....	Coffee, Rio, green, prime; 1-pound sample required, per pound.....			33
34	2 dozen.....	Coolers, water, 6-gallon; sample required, per dozen.....			34
35	1,500 pounds.....	Cream of tartar; sample required.....per pound.....			35
36	30 dozen.....	Cups, tin; sample required.....per dozen.....			36
37	250 dozen.....	Cups and saucers, 12 cups and saucers to the dozen; sample required, per dozen.....			37
38	2 dozen.....	Cups, mustard, with spoons; sample required, per dozen.....			38

<sup>a</sup> May be delivered in carload lots on hospital switch of B. & O. R. R., if preferred.

## Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
		<i>Division I.—Meats, provisions, groceries, feed, crockery, etc.—Continued.</i>			
39	10 dozen	Cruets, pepper; sample required . . . per dozen.			39
40	5 dozen	Cruets, vinegar; sample required . . . do.			40
41	15 dozen	Dustpans; sample required . . . do.			41
42	2 dozen	Dishes, soap, plain, flat, uncovered . . . do.			42
43	15 dozen	Dishes, butter, covered; sample required . . . do.			43
44	100 dozen	Dishes, side; sample required . . . do.			44
	3,500 barrels	Flour, baker's mixture; 5-pound sample required; give price for each brand (state whether winter or spring wheat) <sup>a</sup> , per barrel.			
45					45
46	20 barrels	Flour, Graham; 5-pound sample required, per barrel.			46
47	500 pounds	Flour, buckwheat . . . per pound.			47
48	5 gross	Forks, like hospital sample . . . per gross.			48
49	200 pounds	Ginger, ground; sample required . . . per pound.			49
50	600 pounds	Gelatin; state brand . . . do.			50
51	40,000 pounds	Ham, best sugar-cured; state brand . . . do.			51
52	200 tons	Hay, clover, best . . . per ton.			52
53	10,000 pounds	Hominy, best quality, coarse . . . per pound.			53
54	3,000 pounds	Hair, best gray drawings in rope; state source of supply; sample required, per pound.			54
55	6 gross	Jars, preserve, Mason's or equal, best quality, 2-quart, per gross.			55
56	5 gross	Knives, like hospital sample . . . per gross.			56
57	15,000 pounds	Lamb . . . per pound.			57
58	55,000 pounds	Lard, best leaf; state brand . . . do.			58
59	18,000 pounds	Liver, beef . . . do.			59
60	12 dozen cans	Lye, concentrated . . . per dozen cans.			60
61	100 gross	Matches, safety; sample required . . . per gross.			61
62	30,000 pounds	Mutton . . . per pound.			62
63	300 bushels	Meal, white corn, family; sample required, per bushel.			63
64	2,500 bushels	Meal, corn, feed; sample required . . . per bushel.			64
65	40 tons	Meal, gluten; sample required . . . per ton.			65
66	10,000 pounds	Macaroni; sample required . . . per pound.			66
67	50 pounds	Mace, ground; sample required . . . do.			67
68	175 barrels	Mackerel, Fancy No. 2 . . . per barrel.			68
69	300 pounds	Mustard, ground; sample required . . . per pound.			69
70	1,200 gallons	Molasses, N. O.; sample required . . . per gallon.			70
71	150 pounds	Nutmegs, whole; sample required . . . per pound.			71
72	150 dozen	Nappies; sample required . . . per dozen.			72
73	8,000 bushels	Oats, white, best quality; sample required, per bushel. <sup>a</sup>			73
74	45,000 pounds	Oats, Quaker, rolled; state brand . . . per pound.			74
75	24 dozen bottles	Oil, olive, Lucca, half pints; state brand; sample required, per dozen.			75
76	750 gallons	Oil, Astral, equal to Pratt's, in cans; cans to be returned, per gallon.			76
77	2,500 dozen cans	Peas, 2-pound cans; state brand; sample required, per dozen cans.			77
78	6,000 pounds	Peas, split; sample required . . . per pound.			78
79	1,000 pounds	Pepper, black, ground, pure; sample required, per pound.			79
80	25,000 pounds	Peaches, evaporated; sample required, per pound.			80
81	20,000 pounds	Pork, loins . . . per pound.			81
82	28,000 pounds	Prunes; sample required . . . do.			82
83	10 reams	Paper, wrapping, straw, 16×24 . . . per ream.			83
	100 dozen	Pitchers, give price on each size; sample required, per dozen.			
84					84
	500 dozen	Plates, give price on each size; sample required, per dozen.			
85					85
	45 dozen	Platters, give price on each size; sample required, per dozen.			
86					86
87	3 dozen	Pitchers for washbowls; sample of styles required, per dozen.			87
88	10 dozen	Pitchers, sirup, glass; sample required, per dozen.			88

<sup>a</sup> May be delivered in carload lots on hospital switch of B. & O. R. R., if preferred.

## Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
Division I.—Meals, provisions, groceries, feed, crockery, etc.—Continued.					
89	15 dozen .....	Pans, granite ware; sample required... per dozen..			89
90	50 dozen .....	Plates, tin, pie, 8-inch; sample required... do....			90
91	28,000 pounds.....	Rice, best Carolina; sample required, per pound.....			91
92	750 pounds .....	Raisins, London layer; sample required; per pound.....			92
93	2,000 pounds.....	Raisins, Valencia; sample required... per pound..			93
94	350 dozen cans....	Rhubarb, canned, 1-gallon cans; sample required, per dozen cans.....			94
95	60,000 pounds.....	Shoulders, sugar-cured; state brand... per pound..			95
96	150 tons .....	Straw, wheat, baled a..... per ton.....			96
97	2,200 gallons.....	Sirup, best golden; sample required... per gallon..			97
98	1,600 pounds.....	Sugar, cut-loaf; sample required... per pound..			98
99	1,700 pounds.....	Sugar, powdered, XXXX; sample required, per pound.....			99
100	300,000 pounds....	Sugar, granulated, A No. 1; sample required; must be delivered in barrels, a per pound.....			100
101	1,200 pounds .....	Soda, bicarbonate .....			101
102	7,000 pounds .....	Soda, sal .....			102
103	50,000 pounds .....	Salt, fine table .....			103
104	1,500 pounds .....	Salt, rock .....			104
105	75,000 pounds .....	Soap, laundry; sample required a .....			105
106	65,000 pounds .....	Soap stock; sample, with formula required, a per pound.....			106
107	11,000 pounds .....	Soap, sand; sample required .....			107
108	10,000 pounds .....	Soap, Ivory, Proctor & Gamble, or equal; sample required, per pound.....			108
109	75 pounds .....	Soap, castile, white; sample required, per pound.....			109
110	150 pounds .....	Soap, shaving; sample required... per pound..			110
111	8,500 pounds .....	Starch, laundry, equal to Kohnstamm's Bedford; sample required, per pound.....			111
112	2,500 pounds .....	Starch, corn, in 1-pound packages; sample required, per pound.....			112
113	15 dozen .....	Spittoons, aluminum; sample required, per dozen.....			113
114	5 gross .....	Spoons, table, like hospital sample... per dozen..			114
115	5 gross .....	Spoons, tea, like hospital sample .....			115
116	15 dozen .....	Saltcellars; sample required .....			116
117	900 pounds .....	Tapioca, pearl; sample required... per pound..			117
118	1,500 dozen cans ..	Tomatoes, 1-gallon cans; sample required, per dozen cans.....			118
119	6,000 pounds .....	Tea, green, good quality; 1-pound sample required, per pound.....			119
120	5,000 pounds .....	Tea, Oolong, good quality; 1-pound sample required, per pound.....			120
121	10,000 pounds .....	Tobacco, natural leaf, pressed for chewing; sample required, per pound.....			121
122	4,500 pounds .....	Tobacco, Navy, pressed for chewing; sample required, per pound.....			122
123	2,500 pounds .....	Tobacco, smoking, in 2-ounce packages; sample required, per pound.....			123
124	300 dozen .....	Tumblers, straight, equal to hospital sample, per dozen.....			124
125	25,000 pounds .....	Veal .....			125
126	2,000 gallons.....	Vinegar, best cider; sample required, per gallon.....			126
127	10 barrels.....	Whisky, rye, in bond; state age, not under 2 years; sample required, per proof gallon.....			127
128	75 gallons.....	Wine, sherry, genuine Spanish; sample required, per gallon.....			128
Division II.—Dry goods <sup>b</sup> , clothing, shoes, etc.					
129	1,500 .....	Bedsprads, 70 by 81 inches; sample required, each.....			129
130	400 pairs .....	Blankets, white, 7-pound; sample required, per pair.....			130
131	1,000 pairs .....	Blankets, gray, 7-pound; sample required, per pair.....			131
132	100 dozen .....	Bandannas; sample required .....			132
133	50 gross .....	Buttons, suspender (black), 4-hole; sample required, per gross.....			133
134	25 gross .....	Buttons, suspender (white), 4-hole; sample required, per gross.....			134

<sup>a</sup> May be delivered in carload lots on hospital switch of B. and O. R. R., if preferred.

<sup>b</sup> In dry goods where samples are not required the brand or make should be plainly written opposite the item.

*Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.*

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
		<i>Division II.—Dry goods, clothing, shoes, etc.—Continued.</i>			
135	45 gross.....	Buttons, coat, medium size, rubber or horn; sample required, per gross.			135
136	20 great gross.....	Buttons, metal, front (white); sample required, per great gross.			136
137	20 dozen.....	Brushes, dust; sample required.....per dozen.			137
138	15 dozen.....	Brushes, blacking; sample required.....do.....			138
139	4 gross.....	Brushes, hair, medium; sample required, per gross.			139
140	60 dozen.....	Brushes, scrub; sample required.....per dozen.			140
141	10 dozen.....	Brushes, sweeping, 18-inch; sample required, per dozen.			141
142	20 dozen.....	Brushes, tooth, medium; sample required, per dozen.			142
143	25 dozen.....	Brooms, whisk; sample required.....per dozen.			143
144	100 pairs.....	Boots, men's, sizes 8 to 13; sample required, per pair.			144
145	4,000 yards.....	Cotton, bleached, 36-inch, equal to Dwight's "Anchor;" state make; sample required, per yard.			145
146	1,000 yards.....	Cotton, bleached, 42-inch, equal to "Pequot;" state make; sample required, per yard.			146
147	6,000 yards.....	Cotton, bleached, 54-inch, equal to "Pequot;" state make; sample required, per yard.			147
148	600 yards.....	Cotton, bleached, 90-inch, equal to "Pequot;" state make; sample required, per yard.			148
149	12,000 yards.....	Cotton, brown, 36-inch, equal to "Pequot;" state make; sample required, per yard.			149
150	2,000 yards.....	Cotton, brown, 45-inch, equal to "Pequot;" state make; sample required, per yard.			150
151	7,000 yards.....	Cotton, brown, 58-inch, equal to "Utica;" state make; sample required, per yard.			151
152	3,000 yards.....	Crash, Russia; sample required.....per yard.			152
153	4,000 yards.....	Crash, Barnsley, 18-inch; sample required, per yard.			153
154	3,000 yards.....	Crash, tea toweling; sample required, per yard.			154
155	1,000 dozen.....	Cotton, spool, assorted, Clark's O. N. T., or Wilimantic six-cord, or equal; state brand, per dozen.			155
156	50 pounds.....	Cotton batting, best quality, in pound rolls; sample required, per pound.			156
157	100 dozen.....	Collars, men's, linen; sample required, per dozen.			157
158	75 dozen.....	Combs, dressing; sample required.....per dozen.			158
159	4,000 yards.....	Denim, equal to Amoskeag, 9-ounce; sample required, per yard.			159
160	10,000 yards.....	Flannel, canton, unbleached, equal to Amoskeag (B. B.); sample required, per yard.			160
161	1,500 yards.....	Flannel, blue, double width; sample required, per yard.			161
162	10,000 yards.....	Gingham, stout; sample required.....per yard.			162
163	300 pairs.....	Gaiters, Congress, sizes 6 to 12; sample required, per pair.			163
164	3,000 yards.....	Holland, American and Scotch, for curtains, 36-inch, 40-inch, 48-inch, 54-inch, 60-inch, and 72-inch; price on each; sample required, per yard.			164
165	700 dozen.....	Half hose, men's, blue mixed, Nos. 11 and 12; sample required, per dozen.			165
166	225 dozen.....	Hose, women's, seamless, brown or gray; sample required, per dozen.			166
167	100 dozen.....	Handkerchiefs, men's, linen, medium quality; sample required, per dozen.			167
168	20 dozen.....	Handkerchiefs, ladies', linen, medium quality; sample required, per dozen.			168
169	50 pounds.....	Hairpins; sample required.....per pound.			169
170	100 dozen.....	Hats, straw, men's; sample required, per dozen.			170
171	100 dozen.....	Hats, felt, men's; sample required.....do.....			171
172	3,000 yards.....	Jeans, all wool; sample required.....per yard.			172
173	1,500 yards.....	Kersey, army blue; sample required.....do.....			173
174	200 yards.....	Linen, brown, suitable for pants; sample required, per yard.			174
175	2,000 yards.....	Linen, table, medium, 68-inch and 72-inch; sample required, per yard.			175
176	1,000 yards.....	Marseilles, white; sample required.....per yard.			176
177	200 dozen.....	Napkins; sample required.....per dozen.			177
178	8,000.....	Needles, assorted, equal to Millward's; state brand, per 1,000.			178

## Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
Division II.—Dry goods, clothing, shoes, etc.—Continued.					
179	100 dozen.....	Neckties, assorted styles; sample required, per dozen.			179
180	1,000 yards.....	Percalé, assorted styles; sample required; per yard.			180
181	800.....	Sheets, rubber; sample required..... each.			181
182	800 yards.....	Silesia, Lonsdale or equal; state make, per yard.			182
183	10,000 yards.....	Shirting, blue check, 33-inch, heaviest grades; sample required, per yard.			183
184	250 dozen.....	Suspenders, medium quality; sample required, per dozen.			184
185	1,400 pairs.....	Shoes, men's, brogan's, sizes 6 to 18; sample required, per pair.			185
186	200 pairs.....	Shoes, men's, fine, sizes 6 to 12; sample required, per pair.			186
187	300 pairs.....	Shoes, women's, sizes 5 to 9; sample required, per pair.			187
188	2,000 pairs.....	Slippers, men's, sizes 7 to 18, leather counters; sample required, per pair.			188
189	1,000 pairs.....	Slippers, men's, felt; sample required, per pair.			189
190	100 pairs.....	Slippers, women's, leather, sizes 5 to 9; sample required, per pair.			190
191	200 pounds.....	Twine, mattress, best quality; sample required, per pound.			191
192	100 yards.....	Table cover, Turkey red; sample required, per yard.			192
193	75 dozen rolls.....	Tape, stay binding, Nos. 8, 12, 14 (white); price on each size, per dozen rolls.			193
194	200 dozen.....	Towels; sample required..... per dozen.			194
195	3,000 yards.....	Ticking, A. C. A., Amoskeag or equal, 36-inch; sample required, per yard.			195
Division III.—Paints, oils, drugs, a photographic Supplies, etc.					
196	1,300 gallons.....	Alcohol, 95 per cent, in bond; proof gallons, per proof gallon.			196
197	50 gallons.....	Alcohol, wood..... per gallon.			197
198	1,200 pounds.....	Acid, acetic, com..... per pound.			198
199	50 pounds.....	Acid, carbolic, Calvert's No. 5, 1-pound manufacturer's package, per pound.			199
200	250 pounds.....	Acid, oxalic, com..... per pound.			200
201	700 pounds.....	Acid, sulphuric, com., best grade..... do.			201
202	12 pounds.....	Acid, muriatic, c. p..... do.			202
203	35 pounds.....	Acid, muriatic, com..... do.			203
204	16 pounds.....	Acid, nitric, c. p..... do.			204
205	20 pounds.....	Acid, boric..... do.			205
206	10 pounds.....	Acid, citric..... do.			206
207	20 pounds.....	Ammonia, bromide..... do.			207
208	200 pounds.....	Ammonia, liquid, concentrated, 26 per cent, in 4-pound g. s. bottles, per pound.			208
209	10 pounds.....	Ammonia, muriate..... per pound.			209
210	10 pounds.....	Arabic gum, 1st select; sample required..... do.			210
211	10 pounds.....	Arabic gum, granulated..... do.			211
212	2,000 pounds.....	Brown, metallic, equal to Prince's..... do.			212
213	35 pounds.....	Blue, ultramarine, dry..... do.			213
214	3 dozen.....	Brushes (W. W.), medium grade; sample required, per dozen.			214
215	50 pounds.....	Blue, Prussian, in oil..... per pound.			215
216	250 papers.....	Bronze..... per paper.			216
217	2 dozen.....	Brushes (W. W.), best quality; sample required, per dozen.			217
218	2 dozen.....	Brushes, varnish, equal to Clinton's 000000; sample required, per dozen.			218
219	5 dozen.....	Brushes, equal to Clinton's paint, 00000; sample required, per dozen.			219
220	8 dozen.....	Brushes, wall, best quality; give price on widths; sample required, per dozen.			220
221	50 pounds.....	Borax, pulverized..... per pound.			221
222	700 pounds.....	Beeswax, yellow; sample required..... do.			222
223	10 pounds.....	Bismuth, subnitrate..... do.			223
224	300 pounds.....	Chrome green, dry..... do.			224
225	400 pounds.....	Chrome yellow, in oil..... do.			225
226	100 pounds.....	Camphor (gum), Baker & Bro.'s refined or equal; state make, per pound.			226
227	25 pounds.....	Chalk, precipitated, English..... per pound.			227

a In drugs where samples are not required state brand or make.

## Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
		<i>Division III.—Paints, oils, drugs, photographic supplies, etc.—Continued.</i>			
228	50 pounds .....	Chloral hydrate, cryst .....	per pound..		228
229	10 pounds .....	Chloroform, commercial .....	do.....		229
230	3,000 grams .....	Chloroform, Squibb's, in 250-gram cans, per can.			230
231	100 pounds .....	Cocoa butter; state make .....	per pound..		231
232	250 pounds .....	Cotton, absorbent; sample required .....	do.....		232
233	25 pounds .....	Calcium, precip. phosphate of .....	do.....		233
234	20,000 .....	Capsules, 5-grain; state make or brand, per 1,000.			234
235	3 dozen .....	Chamois skins, large; sample required, per dozen.			235
236	200 gallons .....	Disinfectant, equal to chloro-naphtholeum; sample required, per gallon.			236
237	3,000 grams .....	Ether, sulphuric, c. p., Squibb's, in 250-gram cans, per can.			237
238	50 tons .....	Flaxseed meal, for cattle feed; sample required, per ton.			238
239	50 pounds .....	Fluid extract cascara sagrada; state make, per pound.			239
240	25 pounds .....	Fluid extract sarsaparilla, for sirup; state make, per pound.			240
241	30 pounds .....	Fluid extract gentian, comp.; state make, per pound.			241
242	5 pounds .....	Fluid extract ginger; state make .....	per pound..		242
243	3 dozen .....	Fitches, 4-inch; sample required .....	per dozen..		243
244	18,000 yards .....	Gauze, Nos. 2 and 3; price on each number; sample required, per yard.			244
245	100 pounds .....	Glue, best light, Irish .....	per pound..		245
246	100 boxes .....	Glass, window, 2d quality; state brand submit list in triplicate with discount, per box.			246
247	500 pounds .....	Glycerin, pure .....	per pound..		247
248	100 pounds .....	Indian red, in oil .....	do.....		248
249	150 yards .....	Iodoform gauze, J. Ellwood Lee Co. or equal, per yard.			249
250	10 pounds .....	Iron, pyrophosphate .....	per pound..		250
251	50 gallons .....	Japan drier .....	per gallon..		251
252	15,000 pounds .....	Lead, white, Lewis's or equal, in oil; state brand, per pound.			252
253	400 pounds .....	Lead, red, dry .....	per pound..		253
254	100 pounds .....	Lampblack (Germantown) .....	do.....		254
255	125 pounds .....	Lint, surgeon's; sample required .....	do.....		255
256	10 pounds .....	Licorice, Calabria, stick, "Duca di Corigliano," per pound.			256
257	10 pounds .....	Magnesia, carbonate, 2-ounce blocks, per pound.			257
258	1,000 pounds .....	Moth balls .....	per pound..		258
259	20 pounds .....	Niter, sweet spirit .....	do.....		259
260	200 pounds .....	Ocher, yellow, dry .....	do.....		260
261	800 gallons .....	Oil, linseed, raw .....	per gallon..		261
262	20 gallons .....	Oil, cotton-seed .....	do.....		262
263	50 gallons .....	Oil, castor, cold-drawn; state brand .....	do.....		263
264	1,200 gallons .....	Oil, engine, 1-pint sample required; see Specifications; manufacturer and brand specified, per gallon.			264
265	40 dozen .....	Oil, cod liver, emulsion (without iron), in 1-pound bottles; state brand, per dozen.			265
266	500 gallons .....	Oil, cylinder, 1-pint sample required; see Specifications; manufacturer and brand specified, best quality for high-speed engines, per gallon.			266
267	20 gallons .....	Oil, lard, best winter-strained .....	per gallon..		267
268	3,000 pounds .....	Putty .....	per pound..		268
269	500 gallons .....	Preservative, Crockett's No. 1, Berry Bros.' elastic floor finish, F. W. Devoe & Co.'s or equal; state make, per gallon.			269
270	5 reams .....	Paper, filtering, white, best quality .....	per ream..		270
271	500 pounds .....	Paraffin; sample required .....	per pound..		271
272	150 pounds .....	Potash, bromide, crystals .....	do.....		272
273	40 pounds .....	Potash, iodide .....	do.....		273
274	4,000 .....	Pills, cathartic, compound, gelatin-coated; state make, per 1,000.			274
275	20 rolls .....	Plaster, surgeon's silk Isinglass .....	per roll..		275
276	500 rolls .....	Plaster, rubber, adhesive, 1-yard rolls, 7-inch; state make, per roll.			276
277	50 rolls .....	Plaster, belladonna, 1-yard rolls, 7-inch; state make, per roll.			277
278	5 gross .....	Plasters, porous; state make .....	per gross..		278

## Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
		<i>Division III.—Paints, oils, drugs, photographic supplies, etc.—Continued.</i>			
279	75 ounces.....	Quinine, pure (state make), Powers & Weightman or equal, per ounce.			279
280	200 pounds.....	Sienna, burnt, in oil, equal to Masury's best; state make, per pound.			280
281	400 pounds.....	Sienna, raw, in oil, equal to Masury's best; state make, per pound.			281
282	5 dozen.....	Sash tools, equal to Clinton's No. 8; sample required, per dozen.			282
283	300 pounds.....	Salt, Epsom..... per pound.			283
284	40 pounds.....	Sponge, bathing, good; sample required, per pound.			284
285	15 pounds.....	Soda, bromide..... per pound.			285
286	400 pounds.....	Shellac, orange..... per pound.			286
287	30 pounds.....	Sulphur, washed..... do.			287
288	1,000 gallons.....	Turpentine..... per gallon.			288
289	100 pounds.....	Umber, burnt, in oil, equal to Masury's best; state make, per pound.			289
290	300 pounds.....	Venetian red, dry..... per pound.			290
291	60 pounds.....	Vermilion, English dry, in original packages, per pound.			291
292	25 gross.....	Vials, assorted; submit list with prices, in triplicate, per gross.			292
293	200 pounds.....	Whiting..... per pound.			293
294	10 pounds.....	Wild-cherry bark, ground..... do.			294
		<i>Division IV.—Hardware—Engineer's, farm, and stable.</i>			
295	200 pounds.....	Axle grease..... per pound.			295
296	8 gross.....	Butts, tight, iron and brass, assorted; submit list with discount, in triplicate, per gross.			296
297	10 gross.....	Butts, loose, assorted; submit list with discount, in triplicate, per gross.			297
298	1,000 feet.....	Belting, leather; submit list with discount, in triplicate, per foot.			298
299	15 dozen.....	Buckets, galvanized iron; sample required, per dozen.			299
300	1 dozen.....	Currycombs; sample required..... per dozen.			300
301	1 dozen.....	Coal hods; sample required..... do.			301
302	6 dozen.....	Drawer pulls; sample required..... do.			302
303	2 dozen.....	Forks, hay; sample required..... do.			303
304	25 dozen.....	Files, assorted; submit list with discount, in triplicate, per dozen.			304
305	10 dozen.....	Globe valves, Jenkins's, assorted; give price of each size, per dozen.			305
306	10 pints.....	Glue, Le Page's, in 1-pint cans..... per pint.			306
307	36 dozen.....	Hooks, school hooks, japanned, No. 156, per dozen.			307
308	3,000 pounds.....	Horseshoes, best quality..... per pound.			308
309	200 pounds.....	Horseshoe nails, Putnam's..... do.			309
310	500 feet.....	Hose, rubber, heavy, 4-inch; sample required, per foot.			310
311	2,000 pounds.....	Iron, assorted..... per pound.			311
312	200 pounds.....	Iron, galvanized, No. 27..... do.			312
313	200 pounds.....	Leather, lace..... do.			313
314	600 pounds.....	Leather, sole, oak tanned, thick..... do.			314
315	12 dozen.....	Locks, wardrobe, Nos. 146, 159, 158, 173, and 642, per dozen.			315
316	500 pounds.....	Mule shoes, best quality..... per pound.			316
317	4,000 gallons.....	Naphtha; state specific gravity..... per gallon.			317
318	100 kegs.....	Nails, wire (state make), assorted; submit list with discount, in triplicate, per pound.			318
319	500 pounds.....	Pipe, lead, assorted..... per pound.			319
320	500 pounds.....	Rope, manila; state price on different sizes, per pound.			320
321	200 pounds.....	Rope, hemp, state price on different sizes, per pound.			321
322	3 dozen.....	Rakes, hay; sample required..... per dozen.			322
323	12 dozen.....	Saws, hack, 8-inch, Star or equal..... do.			323
324	12 dozen.....	Saws, hack, 10-inch, Star or equal..... do.			324
325	500 gross.....	Screws, assorted, iron and brass; submit list with discount in triplicate, per gross.			325
326	12 gross.....	Screw eyes, medium size..... per gross.			326
327	5 reams.....	Sandpaper, flint, Baeder, Adamson & Co.'s, or equal; state make, per ream.			327



## Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
		<i>Division IV.—Hardware—Engineer's, farm, and stable—Continued.</i>			
328	5 dozen .....	Scoops, coal, large size; sample required, per dozen.			328
329	500 pounds .....	Solder, tinnern, best, $\frac{1}{4}$ and $\frac{1}{2}$ , equal to Hungerford's or Merchant's, per pound.			329
330	1 dozen .....	Stepladders, 3 to 10 feet .....			330
331	20 dozen full p'p's.	Tacks, Swedish, assorted; submit list with discount, in triplicate, per dozen.			331
332	10 boxes .....	Tin, XX; state brand and number of sheets to box, and price for different sizes, per box.			332
333	4 boxes .....	Tin, XXXX; state brand and number of sheets to box, and price for different sizes, per box.			333
334	10 boxes .....	Tin, roofing; state brand; 40 pounds to box, per box.			334
		<i>Division V.—Steam pipe and fittings, plumber's and electrical supplies.</i>			
335		Steam pipe and fittings (pipe to be of standard weight, best quality, lap-welded, wrought iron; steel will not answer):			335
	125 feet .....	$\frac{1}{4}$ -inch, not less than 0.42 pound per foot, per foot.			
	300 feet .....	$\frac{1}{2}$ -inch, not less than 0.559 pound per foot, per foot.			
	1,000 feet .....	$\frac{3}{4}$ -inch, not less than 0.837 pound per foot, per foot.			
	1,500 feet .....	$1\frac{1}{4}$ -inch, not less than 1.115 pounds per foot, per foot.			
	2,000 feet .....	$1\frac{1}{2}$ -inch, not less than 1.668 pounds per foot, per foot.			
	1,500 feet .....	$1\frac{3}{4}$ -inch, not less than 2.244 pounds per foot, per foot.			
	1,000 feet .....	$2\frac{1}{4}$ -inch, not less than 2.678 pounds per foot, per foot.			
	1,000 feet .....	2-inch, not less than 3.609 pounds per foot, per foot.			
	500 feet .....	2 $\frac{1}{2}$ -inch, not less than 5.739 pounds per foot, per foot.			
	500 feet .....	3-inch, not less than 7.536 pounds per foot, per foot.			
336		Gray cast-iron fittings for above pipe, to be of the best grade, free from sand holes or other flaws or defects, of standard weight and tapping:			336
	5,000 pounds .....	Tees, assorted sizes, ranging from $\frac{1}{4}$ -inch to 3-inch, including reducing sizes, per pound.			
337	5,000 pounds .....	L's, assorted sizes, ranging from $\frac{1}{4}$ -inch to 3-inch, including reducing sizes, per pound.			337
338	300 pounds .....	Screw plugs, assorted sizes, ranging from $\frac{1}{4}$ -inch to 3-inch, per pound.			338
339	500 pounds .....	Bushings, assorted sizes, $\frac{1}{4}$ -inch to 3-inch, per pound.			339
340		Box unions, Kewanee or equal (submit sample):			340
	10 dozen .....	$\frac{1}{4}$ -inch .....			
	10 dozen .....	$\frac{1}{2}$ -inch .....			
	25 dozen .....	$\frac{3}{4}$ -inch .....			
	25 dozen .....	1-inch .....			
	20 dozen .....	$1\frac{1}{4}$ -inch .....			
	10 dozen .....	$1\frac{1}{2}$ -inch .....			
	10 dozen .....	2-inch .....			
	5 dozen .....	2 $\frac{1}{2}$ -inch .....			
		Packing:			
341	500 pounds .....	Garlock, style No. 15 .....			341
342	200 pounds .....	Garlock, style No. 150 .....			342
343	250 pounds .....	Daniels P. P. P. .....			343
344	50 pounds .....	Dales steam-trap packing .....			344
345	200 pounds .....	Tuck's, best quality, style 63 .....			345
346	200 pounds .....	Garlock waterproof hydraulic packing, per pound.			346
347	200 pounds .....	Daniels ebonite sheet packing .....			347
348	500 pounds .....	Eclipse tubular gaskets .....			348
349		Scotch gauge glasses, best grade:			349
	12 dozen .....	$\frac{1}{2}$ inch by 16 inches .....			
	6 dozen .....	$\frac{1}{2}$ inch by 16 inches .....			
	6 dozen .....	$\frac{1}{2}$ inch by 16 inches .....			
350	300 pounds .....	Albany grease .....			350

Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
		<i>Division V.—Steam pipe and fittings, plumber's and electrical supplies—Continued.</i>			
351		Plumber's supplies and fittings: pipe, best grade of galvanized, lap-welded wrought iron, and of standard weight:			351
	1,000 feet.....	1-inch..... per foot..			
	2,000 feet.....	1-inch..... do.....			
	2,000 feet.....	1-inch..... do.....			
	1,500 feet.....	1½-inch..... do.....			
	1,500 feet.....	1½-inch..... do.....			
	1,000 feet.....	2-inch..... do.....			
	500 feet.....	2½-inch..... do.....			
352		Fittings for above pipe, galvanized, best grade malleable cast iron, free from sand holes, cracks, or other defects, and of standard weight (sample required):			352
	1,000 pounds.....	1" & 1½-inch to 3-inch, assorted..... per 100 pounds..			
	1,000 pounds.....	Tees, 1-inch to 3-inch, assorted..... do.....			
	500 pounds.....	45° L's, 1-inch to 3-inch, assorted..... do.....			
353		Kewanee galvanized box unions, or equal (sample required):			353
	10 dozen.....	1-inch..... per dozen..			
	10 dozen.....	1½-inch..... do.....			
	10 dozen.....	1-inch..... do.....			
	10 dozen.....	1½-inch..... do.....			
	10 dozen.....	1½-inch..... do.....			
	10 dozen.....	2-inch..... do.....			
354		Compressed cocks, bibb and hose, Mueller Mfg. Co.'s or equal (sample required):			354
	10 dozen.....	1-inch bibb..... per dozen..			
	10 dozen.....	1½-inch bibb..... do.....			
	5 dozen.....	1-inch hose..... do.....			
355		Self-closing cocks, bibb and basin, Bashlin or equal, N. P. (sample required):			355
	6 dozen.....	1-inch plain bibb..... per dozen..			
	6 dozen.....	1½-inch plain bibb..... do.....			
	6 dozen.....	1-inch basin cocks..... do.....			
	6 dozen.....	1-inch basin cocks..... do.....			
356		Square-head brass stopcocks, without waste, Mueller Mfg. Co.'s or equal (sample required):			356
	6 dozen.....	1-inch..... per dozen..			
	6 dozen.....	1-inch..... do.....			
	6 dozen.....	1-inch..... do.....			
	6 dozen.....	1½-inch..... do.....			
	6 dozen.....	1½-inch..... do.....			
	6 dozen.....	2-inch..... do.....			
357		Green cast-iron soil pipe, XX, best quality gray cast iron, free from sand holes, cracks, or other defects:			357
	75 feet.....	2-inch, double hub..... per foot..			
	150 feet.....	2-inch, single hub..... do.....			
	100 feet.....	3-inch, double hub..... do.....			
	150 feet.....	3-inch, single hub..... do.....			
	150 feet.....	4-inch, double hub..... do.....			
	300 feet.....	4-inch, single hub..... do.....			
	50 feet.....	5-inch, double hub..... do.....			
	300 feet.....	5-inch, single hub..... do.....			
		Fittings for green cast-iron soil pipe (to be of the same weight and specifications as pipe):			
	25.....	Tees, 1-inch..... each.....			
	25.....	Tees, 1½-inch..... do.....			
	15.....	Tees, 2-inch..... do.....			
	15.....	Tees, 3 by 4 inches..... do.....			
	25.....	Tees, 4 by 3 inches..... do.....			
	15.....	Tees, 3 by 2 inches..... do.....			
	25.....	2-inch bends..... do.....			
	25.....	3-inch bends..... do.....			
	50.....	4-inch bends..... do.....			
	10.....	5-inch bends..... do.....			
	25.....	2-inch bends..... do.....			
	25.....	3-inch bends..... do.....			
	50.....	4-inch bends..... do.....			
	10.....	5-inch bends..... do.....			
	15.....	2-inch long sweeps..... do.....			
	25.....	3-inch long sweeps..... do.....			
	25.....	4-inch long sweeps..... do.....			

## Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.

Item No.	Estimated quantity.	Articles.	Rate.		Item No.
			Dollars.	Cents.	
		<i>Division V.—Steam pipe and fittings, plumber's and electrical supplies—Contd. ued.</i>			
		Fittings for green cast-iron soil pipe (to be of the same weight and specifications as pipe)—Continued.			
	15	2 by 2 inch Y's .....	each		
	25	3 by 3 inch Y's .....	do		
	50	4 by 4 inch Y's .....	do		
	15	3 by 2 inch Y's .....	do		
	25	4 by 2 inch Y's .....	do		
	25	4 by 3 inch Y's .....	do		
360	10	5 by 4 inch Y's .....	do		
	15	4-inch double Y's .....	do		
	15	2 by 2 inch sanitary Y's .....	do		
	10	3 by 3 inch sanitary Y's .....	do		
	15	4 by 4 inch sanitary Y's .....	do		
	10	3 by 2 inch sanitary Y's .....	do		
	10	4 by 2 inch sanitary Y's .....	do		
	10	4 by 3 inch sanitary Y's .....	do		
	50	2-inch P traps .....	do		
	50	3-inch P traps .....	do		
361	50	4-inch P traps .....	do		
	50	‡ S traps, 2-inch .....	do		
	50	‡ S traps, 3-inch .....	do		
	50	‡ S traps, 4-inch .....	do		
		(All cast-iron traps to have hand-hole.)			
		Lead pipe and fittings:			
	24	1½-inch P traps .....	do		
362	24	1½-inch S traps .....	do		
	24	1½-inch ‡ traps .....	do		
363	6 dozen	1½-inch brass soldering thimbles .....	per dozen		
	6 dozen	2-inch calking thimbles .....	do		
364	3,000 pounds	Calking lead .....	per pound		
365	200 pounds	Calking jute .....	do		
		<i>Electrical supplies.</i>			
366	3 dozen	Batteries, Sampson No. 2 or equal .....	per dozen		
367	3 dozen	Bells, 3-inch skeleton .....	do		
	500	Bolts, expansion, ½ by 2½ inches lead, Pierce or equal, per 100 .....			
368	500	Bolts, expansion, ½ by 3½ inches lead, Pierce or equal, per 100 .....			
369	250	Bassett standard outlet and switchbox, 4 by 4 by 1½ inches, per 100 .....			
370	250	Bushings, socket, ½-inch .....	each		
	250	Bushings, Shawmut or equal, ½-inch (conduit), per 100 .....			
	250	Bushings, Shawmut or equal, ¾-inch (conduit), per 100 .....			
371	250	Bushings, Shawmut or equal, 1-inch (conduit), per 100 .....			
	250	Bushings, Shawmut or equal, 1½-inch (conduit), per 100 .....			
372	200	Carbons (Electra), ½ by 12 inches, for arc lamps, per 100 .....			
373	500	Cleats, Duggan, No. 4 .....	per 100		
	250	Couplings, combination, Greenfield or equal, ½-inch, per 100 .....			
	250	Couplings, combination, Greenfield or equal, ¾-inch, per 100 .....			
374	250	Couplings, combination, Greenfield or equal, 1-inch, per 100 .....			
	250	Couplings, combination, Greenfield or equal, 1½-inch, per 100 .....			
375	1 barrel	Compound, insulating, P. & B. No. 2 .....	per barrel		
376	500 feet	Cord, cotton-covered, No. 16 .....	per foot		
	1,000 feet	Conduit, Greenfield or equal, ½-inch, per 100 feet .....			
	1,000 feet	Conduit, Greenfield or equal, ¾-inch, per 100 feet .....			
377	1,000 feet	Conduit, Greenfield or equal, 1-inch, per 100 feet .....			
	1,000 feet	Conduit, Greenfield or equal, 1½-inch, per 100 feet .....			
	500	Conduit bushings, Greenfield or equal, ½-inch, per 100 .....			
	500	Conduit bushings, Greenfield or equal, ¾-inch, per 100 .....			
378	500	Conduit bushings, Greenfield or equal, 1-inch, per 100 .....			
	500	Conduit bushings, Greenfield or equal, 1½-inch, per 100 .....			

Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.

Item No.	Estimated quantity.	Articles.	Rate.		Item No.	
			Dollars.	Cents.		
Electrical supplies—Continued.						
379	1,000 feet .....	Conduit, loricated, $\frac{1}{4}$ -inch .....	per 100 feet..		379	
	1,000 feet .....	Conduit, loricated, $\frac{1}{2}$ -inch .....	do.....			
	1,000 feet .....	Conduit, loricated, 1-inch .....	do.....			
	1,000 feet .....	Conduit, loricated, $\frac{3}{4}$ -inch .....	do.....			
380	250 .....	Conduit lock nuts, $\frac{1}{4}$ -inch .....	per 100..		380	
	250 .....	Conduit lock nuts, $\frac{1}{2}$ -inch .....	do.....			
	250 .....	Conduit lock nuts, 1-inch .....	do.....			
	250 .....	Conduit lock nuts, $\frac{3}{4}$ -inch .....	do.....			
381	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 6 amperes, each.			381	
	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 10 amperes, each.				
	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 15 amperes, each.				
	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 25 amperes, each.				
	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 35 amperes, each.				
	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 50 amperes, each.				
	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 75 amperes, each.				
	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 100 amperes, each.				
	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 125 amperes, each.				
	50 .....	Fuses, D. & W. cartridge, 2 $\frac{1}{2}$ -inch centers, 150 amperes, each.				
	382	50 .....	Globes, inner, 7 $\frac{1}{2}$ inches long, 2 $\frac{1}{2}$ inches in diameter, $\frac{1}{8}$ -inch thick, A. B. lamps, each.			382
	383	8 gross .....	Plugs, attachment, fusible, brass top, Edison, per gross.			383
384	10 pounds .....	Paste, soldering, Brumley's, $\frac{1}{2}$ -pound boxes, per pound.		384		
385	250 .....	Switches, lock, single pole, Diamond H, per 100 feet.		385		
386	500 .....	Sockets, Edison, fiber-lined, key... per 100 feet..		386		
387	500 .....	Sockets, Edison, fiber-lined, keyless .....	do.....			
	100 pounds .....	Tape, Grimshaw, $\frac{1}{4}$ -inch, black .....	per pound..			
388	50 pounds .....	Tape, okonite, $\frac{1}{4}$ -inch .....	do.....		388	
	1,000 feet .....	Wire, weatherproof, slow-burning, No. 14, per 100 feet.				
	1,000 feet .....	Wire, weatherproof, slow-burning, No. 12, per 100 feet.				
	1,000 feet .....	Wire, weatherproof, slow-burning, No. 10, per 100 feet.				
	1,000 feet .....	Wire, rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 14, solid, per 100 feet.				
	1,000 feet .....	Wire, rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 12, solid, per 100 feet.				
	1,000 feet .....	Wire, rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 10, solid, per 100 feet.				
	1,000 feet .....	Wire, rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 8, stranded, per 100 feet.				
	1,000 feet .....	Wire, rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 6, stranded, per 100 feet.				
	1,000 feet .....	Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 14, solid, per 100 feet.				
	1,000 feet .....	Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 12, solid, per 100 feet.				
	389	1,000 feet .....	Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 10, stranded, per 100 feet.			
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 8, stranded, per 100 feet.				
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 6, stranded, per 100 feet.				
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 4, stranded, per 100 feet.				
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 2, stranded, per 100 feet.				
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 14, solid, per 100 feet.				
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 12, solid, per 100 feet.				
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 10, stranded, per 100 feet.				
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 8, stranded, per 100 feet.				
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 6, stranded, per 100 feet.				
1,000 feet .....		Wire (duplex), rubber-covered, double braid, $\frac{3}{4}$ -inch rubber, No. 4, stranded, per 100 feet.				
390		5 miles .....	Wire, telephone line, bare, No. 10.... per mile.		390	
391	5 miles .....	Wire, telephone line, bare, No. 10.... per mile.		391		

*Schedule of items, Government Hospital for Insane, fiscal year ending June 30, 1907—Con.*

Summary. NOTE.—The bidder will insert below the aggregate cost of the articles in each division of the schedule at the rates proposed by him.	Aggregate.	
	Dollars.	Cts.
For supplies under Division I.—Meats, provisions, groceries, etc.....	.....	.....
For supplies under Division II.—Dry goods, clothing, shoes, etc.....	.....	.....
For supplies under Division III.—Paints, oils, drugs, etc.....	.....	.....
For supplies under Division IV.—Hardware, farm, and stable.....	.....	.....
For supplies under Division V.—Steam-pipe fittings, plumber's and electrical supplies.....	.....	.....
Total.....	.....	.....

[Indorsement.]

No. —.

Proposal of — for general supplies for Government Hospital for the Insane,  
ring the fiscal year 1906-7.

### EXHIBIT—SCHÖNEBERGER, No. 1.

LAWS OF THE ANATOMICAL BOARD OF THE DISTRICT OF COLUMBIA.

ANIZATION OF THE ANATOMICAL BOARD OF THE DISTRICT OF COLUMBIA, 1903.

President: Dr. Frank Baker, Zoological Park.

Secretary: Dr. W. F. R. Phillips, 1607 Sixteenth street NW.

Representatives: Dr. D. K. Shute and Dr. W. F. R. Phillips, Colum-  
bia University, medical and dental departments; Dr. Frank Baker  
E. W. Reisinger, Georgetown University, Medical and Dental  
Departments; Health officer, Dr. W. C. Woodward; Dr. D. S. Lamb and  
Dr. Robert Reyburn, Howard University, medical and dental depart-  
ments; Dr. H. H. Barker and Dr. M. F. Thompson, National Univer-  
sity, medical and dental departments; Dr. L. A. La Garde and Dr. W. C.  
Borden, U. S. Army Medical School; Dr. R. A. Marmion and Dr. J. C.  
Boyd, U. S. Navy Medical School.

Agent, Mr. William Schöneberger, No. 6 Police Station, northwest.

#### ARTICLE I.

SECTION 1. The officers shall be a president and a secretary, who shall hold office for the term of one year, or until their successors are elected and installed. Election shall be by ballot. These officers shall perform the duties usually incumbent on such officers and such other duties as may be hereinafter imposed. The secretary shall also act as treasurer.

SEC. 2. The regular meetings of the board shall be held on the fourth Monday of October, January, and May at 2 o'clock p. m. Special meetings may be called by the secretary whenever, in his judgment, matters requiring the attention of the board so demand; he shall also call a special meeting of the board whenever so requested in writing by three other members.

A quorum shall consist of a representative from a majority of the schools entitled to membership. Voting, except for election of officers, may be viva voce.

## ORDER OF BUSINESS.

Reading and approving minutes of last meeting.

Reading of communications.

Unfinished business.

New business.

SEC. 3. The schools and boards, through their proper officers, shall notify the board of any changes made from time to time in the personnel of their respective representatives.

SEC. 4. The board shall appoint an agent, whose duty it shall be to collect, preserve, and distribute cadavers and dispose of remains, under such regulations as may from time to time be issued to him by the board. He shall also serve or publish the notices required by law to be served or published.

For the proper performance of all said duties, said agent shall be paid for each cadaver delivered to the schools or boards entitled to receive cadavers, such fee as the board shall from time to time fix.

SEC. 5. The following bound records shall be kept, viz, a book of minutes, a record showing, by suitable identification mark, each cadaver accepted and received by the board, its class, name of school or board to which assigned, and date of delivery thereto; also an index showing alphabetically the name of each cadaver accepted and received, its identification mark, and date of death. These records shall be kept under the direction of the secretary. There shall also be kept, under his charge, a letterpress correspondence book in which all correspondence by the board or its authorized officers shall be press copied or otherwise duplicated.

## ARTICLE II.

SECTION 1. Ratios for the apportionment of cadavers will be established by the board at its regular meetings or at such other meetings or in such other manner as it may from time to time determine.

SEC. 2. The secretary may decide any claim made by relatives or friends of bodies in possession of the board, or delivered by the board to the schools and boards entitled thereto; or he may call a special meeting of the board for such purpose.

Delivery of a cadaver to a school or board does not necessarily remove the cadaver without the jurisdiction of the board for the purpose of restoration to relatives or friends in case claim is made by either.

SEC. 3. Cadavers claimed after delivery to schools or boards and ordered surrendered by the board will not be charged against the quota of such schools or boards.

SEC. 4. Cadavers assigned and refused without sufficient cause will be charged against the quota of the school or board refusing them. The cause of refusal, to receive consideration, must be made by the school or board in writing and filed with the secretary within twenty-four hours after refusal.

SEC. 5. Schools and boards, through their proper officers, must notify the secretary in writing whenever they are ready to receive cadavers, or whenever they desire to cease receiving cadavers.

SEC. 6. Claimants appearing without an order from the board at any of the schools or boards will be referred to the secretary.

## ARTICLE III.

SECTION 1. The proper officer of each school, in order that said school shall be eligible to receive cadavers, shall report in writing the names and addresses of all students engaged in the study of medicine or dentistry on the 15th day of November and the 15th day of May.

SEC. 2. A single cadaver shall be assignable at the beginning of each fiscal year to the examining board of the Army, to the examining board of the Navy, to the examining board of the Marine-Hospital Service, and to the board of medical supervisors of the District of Columbia. Additional cadavers shall be assignable to each of the said boards from time to time as may be warranted under the law by evidence to be submitted by said boards.

## ARTICLE IV.

SECTION 1. Cadavers will be classified for distribution as follows:

*Class A.*—Adults, un mutilated, except that the loss of one or more digits, provided all on an extremity be not lost, shall not be considered as constituting a mutilation. Nor shall scars, bruises, cuts, or wounds that do not destroy structures usually dissected, or prevent proper injection, be considered as mutilations.

*Class B.*—Adults upon whom post-mortems have been performed, or surgical operations involving the removal or attempted removal of any of the viscera.

*Class C.*—Adults that by reason of great obesity, dropsy, or any other cause not previously specified that would obviously not permit of instructive dissection in the usual number of parts into which the cadaver is divided for dissection.

*Classes D, E, and F.*—Same as classes A, B, and C, respectively, except in that of being cadavers of children.

*Class G.*—Infants.

Adults will be considered as all over the age of 16 years, or of bodies of average sizes of such ages; children between ages of 3 and 16 years, and infants under 3 years.

Apportionment of the foregoing classes will be in accordance with the respective ratios to which schools and boards are entitled.

## ARTICLE V.

SECTION 1. All moneys receivable by the board shall be paid to the secretary, who shall duly receipt therefor. All moneys payable by the board shall be paid by the secretary on the written approval of the president. The secretary shall submit at each regular meeting a statement of all moneys received and disbursed by him.

## ARTICLE VI.

SECTION 1. Amendments to these by-laws must be submitted in writing at a regular meeting and go over to the next regular meeting. A two-thirds majority shall be necessary to adopt an amendment.

## EXHIBIT—SCHÖNEBERGER, No. 2.

PUBLIC—No. 77.—An Act For the promotion of anatomical science, and to prevent the desecration of graves in the District of Columbia.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,* That any public officer or officers, whether directors, trustees, superintendents, wardens, keepers, or managers, having lawful charge of or control over any hospital, prison, jail, or morgue, within the District of Columbia, may, with the approval of the health officer of said District, deliver to the duly authorized agent of any medical college or colleges in the District of Columbia, the bodies of such deceased persons as are required to be buried at the public expense, said bodies to be distributed among the several colleges in proportion to the number of students in each: *Provided, however,* That if the deceased person, during his last illness, requested to be buried, or if within forty-eight hours, after his death any person claiming to be, and satisfying the health officer that he is, a relative by blood or marriage, or friend of the deceased, asks to have the body buried, or if such deceased person was a stranger or traveler who suddenly died, the body shall not be so delivered, but shall be buried.

SEC. 2. That before the bodies of such deceased persons as are mentioned in the first section shall be delivered to the authorized agents of any medical college in the District of Columbia notice shall be given by the person or persons having lawful charge of said bodies to the relative or friend of the deceased, if known; if not known, the death of the deceased shall be published at least once in a daily newspaper published in the city of Washington, in the District of Columbia, in which publication the full name of the deceased person shall, if possible, be given, and if such name be not known, a description of the person and apparel of the deceased, with information of the place where they may be seen, the expenses of such publication to be paid as other expenses of the District of Columbia are paid: *Provided,* That the persons named in the first section shall not deliver the body of the deceased, as provided in this Act, until at least thirty-six hours shall have elapsed since the death of said deceased and giving of said notice or the publication of the same.

SEC. 3. That every person who shall have been duly authorized by the faculty of any medical college in the District of Columbia to receive such dead bodies shall, before so receiving them, give to the health officer of said District a bond in the sum of two hundred dollars, with surety satisfactory to said health officer, and conditioned that each dead body shall be used only for the promotion of anatomical and surgical knowledge within the said District of Columbia, and that after having been so used the remains thereof shall be decently buried; and whosoever shall use such body or bodies for any purpose other than that aforesaid, or shall remove the same beyond the limits of the District of Columbia, and whosoever shall sell or buy such body or bodies, or in any way traffic in the same, or who shall disturb or remove bodies from graves in which they have been buried, or who shall disregard the expressed wishes of the deceased, or of his or her friends, where such wishes may be disclosed, as provided for in section one of this Act, shall be deemed guilty of a misdemeanor, and shall, on conviction, be imprisoned for a term not less than two nor more than three years, at hard labor, in the jail of said District.

Approved, February 26, 1895.



PUBLIC—No. 87.—An Act For the promotion of anatomical science and to prevent the desecration of graves in the District of Columbia.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,* That there shall be, and is hereby, created, in and for the District of Columbia, a board for the control of the dead human bodies hereinafter described, and for the distribution of such bodies among and to the schools in said District conferring the degree of doctor of medicine or doctor of dental surgery, or both; the Post Graduate School of Medicine, incorporated by an Act of Congress, approved February seventh, eighteen hundred and ninety-six, entitled "An Act to incorporate the Post Graduate School of Medicine of the District of Columbia;" the medical schools of the United States Army and Navy; the medical examining boards of the United States Army, Navy, and Marine-Hospital Service; and the board of medical supervisors of the District of Columbia. Said board shall be known as the Anatomical Board of the District of Columbia, and shall consist of the health officer of said District and two representatives from each school aforesaid actually engaged in teaching, to be selected by and from the faculty thereof in accordance with the by-laws of such faculty, except in the case of the medical schools of the United States Army and Navy, the representatives from which shall be selected and detailed by the Surgeon-General of the Army and the Surgeon-General of the Navy. Said health officer shall call a meeting of said anatomical board for organization at a time and place to be fixed by said health officer as soon as practicable after the passage of this Act. Said anatomical board shall have full power to establish by-laws for its government and to appoint and to remove proper officers and agents, and shall keep full and complete records of its transactions and of all material facts pertaining to the receipt and distribution of bodies. Said records shall be open at all times for inspection by any member of said anatomical board and by the United States attorney for the District of Columbia.

SEC. 2. That every public officer, agent, and servant, and every officer, agent, and servant of any and every almshouse, prison, jail, asylum, morgue, hospital, and other public institutions and offices having charge or control of dead human bodies requiring to be buried at public expense, shall notify said anatomical board, or such person as may be designated by the said board, whenever any dead human body comes into his possession, charge, or control for burial at public expense. And every such officer, agent, and servant shall, upon application by said anatomical board or its agent, without fee or reward, and complying with the laws and regulations governing the removal of dead human bodies in the District of Columbia, deliver every such body to said board and permit said board or its agent to take and remove the same. The notice aforesaid shall be given in writing and forwarded to said anatomical board within twenty-four hours after said officer, agent, or servant comes into possession, charge, or control of such body for burial, and shall include such material information as said board may designate. But no such body shall be delivered if the deceased person, during his last illness, without suggestion or solicitation, requested to be buried or cremated; or if within the time specified above and before the actual delivery thereof any person claiming to be and satisfying the officer in charge of such body that he is of kindred or is related by marriage to the deceased

shall claim the said body for burial or cremation, or request in writing that it be buried at public expense; or if within the time specified above and before actual delivery any person claiming to be and satisfying the officer in charge of such body that he is a friend of the deceased arranges to have the same properly buried or cremated without expense to the District; or if the deceased person was a traveler who died suddenly; but in any such case said body shall be buried or delivered to said applicant for burial.

SEC. 3. That the said anatomical board may receive the bodies reported to it as aforesaid, and may distribute and deliver such as are received among and to such of the schools and boards entitled thereto as request in writing to receive the same, except as otherwise expressly directed in this Act. Each such school and board shall receive annually, as nearly as may be practicable, such proportion of the entire number of bodies distributed as the number of students enrolled and in regular attendance at such school, and the number of candidates appearing for examination before such board, respectively, engaged bona fide at such school, or examined by said board in dissecting, and operative surgery on the cadaver, bears to the total number of students so enrolled in attendance, and engaged, and of persons so examined, in the District of Columbia. The secretary, dean, or other proper officer of each such schools and board shall report to said anatomical board the names of all such students in attendance at such school or persons examined by said board, as the case may be, at such times and in such form as said board may direct. All bodies shall be delivered among such schools and boards in regular order so as to maintain, as nearly as may be practicable, an equitable allotment at all times; and bodies assigned to any school or board in regular order and refused by such school or board without sufficient cause shall be charged against the quota of such school or board in such manner as not to prejudice any other school or board. But no body shall be delivered to any school or board unless within not less than twenty-four hours prior to such delivery notice of the death has been given by said anatomical board to the nearest known kinsman, relative by marriage, or friend of the deceased, or if none such be known, published by said anatomical board at least once in a daily newspaper published in the city of Washington, in the District of Columbia. The notice required by this section shall be deemed to have been given if served in writing on the person to be notified, or if left at his usual place of residence with some adult person residing therein, or a member of the family of such person. Said board shall take receipts by name, or, if the name be unknown, by a description, for each body delivered; all receipts so obtained by said board shall be properly filed by it.

SEC. 4. That no school except the medical schools of the United States Army and Navy shall receive any body under the provisions of this Act until said school has given bond to the District of Columbia, and the Board of Commissioners of said District has approved such bond, which said bond shall be in the penal sum of two hundred dollars and conditioned that all bodies which said school shall receive shall be used in said District and only for the promotion of the science and art of medicine and of dentistry.

SEC. 5. That it shall be the duty of each and every officer, agent, and employee of every school and board receiving bodies under the provisions of this Act to see that such bodies are used in the District

of Columbia and for the promotion of the science and art of medicine and of dentistry, and for no other purpose whatsoever, and that after being so used the remains thereof are disposed of in accordance with law.

SEC. 6. That any person who shall, in the District of Columbia, sell or buy any body aforesaid, or in any way traffic therewith, or transmit or convey any such body to any place outside of said District, or cause or procure any such body to be so transmitted or conveyed, or who shall, in said District, disturb or remove, without legal permit, any body from any grave or vault, shall, on conviction thereof, be fined not more than two hundred dollars or imprisoned in the workhouse of said District for not more than one year.

SEC. 7. That neither the United States nor the District of Columbia, nor any officer, agent, or servant thereof, shall be at any expense by reason of the delivery of any body or bodies aforesaid, except such as may be properly chargeable on account of bodies delivered to the medical schools of the Army and Navy, the medical examining boards of the Army, the Navy, and the Marine-Hospital Service, and the board of medical supervisors of the District of Columbia; but all expenses of such delivery and distribution, except as hereinbefore specified, and of said anatomical board, shall be paid by the schools receiving such bodies, in such manner as may be specified by said board and by such school in proportion to the number of bodies which it has received; and no school which has failed or refused to pay its just proportion of such expense as determined by said board shall be allowed to receive any body or bodies, or parts thereof, while the amount so due remains unpaid.

SEC. 8. That any person having any duty enjoined upon him by the provisions of this Act who willfully neglects, refuses, or fails to perform the same, shall, upon conviction thereof, be punished by a fine of not more than one hundred dollars or by imprisonment in the workhouse of the District of Columbia for not more than one year.

SEC. 9. That all prosecutions under this Act shall be in the police court of the District of Columbia, on information brought in the name of said District on its behalf.

SEC. 10. That all Acts and parts of Acts inconsistent with this Act be, and the same are hereby, repealed.

Approved, April 29, 1902.

#### EXHIBIT—WHITE, No. 1.

PUBLIC—No. 85.—An Act Relating to the payment and disposition of pension money due to inmates of the Government Hospital for the Insane.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,* That the proviso in the Act approved August seventh, eighteen hundred and eighty-two, appearing on page three hundred and thirty of the Twenty-second Statutes at Large, and relating to pensions of inmates of the Government Hospital for the Insane, is hereby stricken out and the following inserted:

“*Provided,* That in addition to the persons now entitled to admission to said hospital, any inmate of the National Home for Disabled Volunteer Soldiers who is now or may hereafter become insane shall, upon an order of the president of the Board of Managers of the said National

Home, be admitted to said hospital and treated therein. During the time that any pensioner shall be an inmate of the Government Hospital for the Insane all money due or becoming due upon his or her pension shall be paid by the pension agent to the superintendent of the hospital, upon a certificate by such superintendent that the pensioner is an inmate of the hospital and is living, and such pension money shall be by said superintendent disbursed and used, under regulations to be prescribed by the Secretary of the Interior, for the benefit of the pensioner, and, in the case of a male pensioner, his wife, minor children, and dependent parents, or, if a female pensioner, her minor children, if any, in the order named, and to pay his or her board and maintenance in the hospital; the remainder of such pension money, if any, to be placed to the credit of the pensioner and to be paid to the pensioner or the guardian of the pensioner in the event of his or her discharge from the hospital; or, in the event of the death of said pensioner while an inmate of said hospital, shall, if a female pensioner, be paid to her minor children, and, in the case of a male pensioner, be paid to his wife, if living; if no wife survives him, then to his minor children; and in case there is no wife nor minor children, then the said unexpended balance to his or her credit shall be applied to the general uses of said hospital: *Provided further*, That in the case of pensioners transferred to the hospital from the National Home for Disabled Volunteer Soldiers, any pension money to his credit at said Home at the time of his said transfer shall be transferred with him to said hospital and placed to his credit therein, to be expended as hereinbefore provided; and in case of his return from said hospital to the Home, any balance to his credit at said hospital shall, in like manner, be transferred to said Home, to be expended in accordance with the rules established in regard thereto. This provision shall also be applicable to all unexpended pension money heretofore paid to the officers of the said hospital on account of pensioners who were but are not now inmates thereof."

Approved, February 20, 1905.

#### EXHIBIT—WHITE, No. 2.

REGULATIONS FOR THE DISBURSEMENT OF PENSION MONEY PAID TO THE SUPERINTENDENT OF THE GOVERNMENT HOSPITAL FOR THE INSANE, UNDER THE ACT APPROVED FEBRUARY 20, 1905.

DEPARTMENT OF THE INTERIOR,  
*Washington, November 15, 1905.*

The following general rules are prescribed in conformity with the requirements of the act of Congress approved February 20, 1905, for observance in the disbursement of pension money paid to the Superintendent of the Government Hospital for the Insane:

1. All moneys received by the superintendent under this act shall be deposited by him in the United States Treasury to his account as agent, and his bond in that capacity shall include the faithful custody and disbursement of all funds so received.

2. He shall on or before the 15th of each month render a certified statement, in duplicate, to the Secretary of the Interior, showing the state of this fund at the close of the preceding month, together with a

detailed statement giving the individual amounts received and expended on account of each pensioner; the duplicate statement to be forwarded to the Secretary of the Treasury for the information of the proper auditing officer of his Department.

3. The superintendent shall keep a separate account with each pensioner showing the amount of money received and expended, said account to be audited semiannually by a committee appointed by the Secretary of the Interior.

4. The pension money shall be disbursed and used for three general purposes, in order as follows:

First. For the benefit of the pensioner.

Second. For the benefit of relatives entitled under the law.

Third. To reimburse the hospital for the pensioner's board and maintenance.

5. There shall be reserved from each pension an amount, not to exceed one-sixth thereof, to be expended in the purchase of such articles as may be required for the pensioner's welfare and which are not provided from the regular hospital funds, or otherwise for the pensioner's benefit. The remainder, after payment therefrom for the benefit of relatives, if any, as hereinafter provided, shall be charged with the pensioner's board and maintenance in the hospital, and any balance then remaining shall be placed to the pensioner's credit on the books of the hospital.

6. The pension being at the rate of \$12 or less per month, the entire remainder, after reservation for the pensioner's benefit as provided in paragraph 5, will be paid, in the case of a male pensioner, to his dependent wife, minor children, or parents, in the order named; in the case of a female pensioner, to her dependent minor children.

7. The rate of pension being greater than \$12 but not exceeding \$20 per month, the dependent wife, minor children, or parents, in the order named in the case of a male pensioner, or the dependent minor children, in the case of a female pensioner, shall receive not less than \$10 per month.

8. The rate of pension being in excess of \$20 per month, the dependent wife, minor children, or parents, in the order named in the case of a male pensioner, or the dependent minor children in the case of a female pensioner, shall receive an amount equal to one-half the entire pension.

9. If the wife or minor children of a male pensioner, or the minor children of a female pensioner, be not in fact dependent upon the pensioner in any degree for a support, she or they shall receive no greater than one-half the amount payable in case of her or their dependence.

10. Any unexpended balance of pension money reserved for the pensioner's benefit, and any pension money to his or her credit on the books of the hospital, shall be paid, in the event of the pensioner's discharge from the hospital, to the pensioner, or to his or her lawful guardian, or, in the event that the pensioner is returned to a branch of the National Home for Disabled Volunteer Soldiers, to the treasurer of such branch. In the event of the pensioner's death while an inmate of the hospital, the same shall be paid, in the case of a male pensioner, to his widow, or, if there be no widow, to his minor children, and in the case of a female pensioner, to her minor children. If there be no widow nor minor children entitled to payment of such balance of pension money, it shall be applied to the general uses of the hospital.

11. All questions affecting the right of claimants for a share of the pension of inmates of the hospital shall be determined upon evidence to be submitted to the Commissioner of Pensions in accordance with the practice as governed by rulings adopted or opinions rendered from time to time. The findings of the Commissioner of Pensions upon such evidence shall be submitted for the approval of the Secretary of the Interior, and upon their transmission to the superintendent of the hospital with such approval, shall be accepted by him to control the disbursement of the pension under the law and these regulations.

12. The annexed "Table of monthly and quarterly division of rates of pension under the act of February 20, 1905," is hereby made a part of these regulations to serve as a guide in determining in each case the respective amounts to be reserved for the pensioner's benefit, to be paid to relatives entitled, and to be subject to charge for pensioner's board and maintenance. The per month amounts given therein will be used only in the disposition of pensions for periods less than one quarter, and any unusual rates of pension not included will be divided as nearly as may be in the same proportions as therein observed.

THOS. RYAN,  
*Acting Secretary of the Interior.*

*Table of monthly and quarterly division of rates of pension under the act of February 20, 1905.*

Rate.		Reserve for pensioner's benefit.		To dependent wife, minor children, or parents.		To nondependent wife or minor children.		To hospital for board and maintenance, and to pensioner's credit if relatives non-dependent.		To hospital for board and maintenance, and to pensioner's credit if relatives dependent.	
Per month.	Per quarter.	Per month.	Per quarter.	Per month.	Per quarter.	Per month.	Per quarter.	Per month.	Per quarter.	Per month.	Per quarter.
\$2.00	\$6.00	\$0.34	\$1.00	\$1.66	\$5.00	\$0.83	\$2.50	\$0.83	\$2.50		
4.00	12.00	.67	2.00	3.33	10.00	1.67	5.00	1.66	5.00		
5.00	15.00	.84	2.50	4.16	12.50	2.08	6.25	2.08	6.25		
6.00	18.00	1.00	3.00	5.09	15.00	2.50	7.50	2.50	7.50		
6.25	18.75	1.06	3.13	5.20	15.62	2.60	7.81	2.60	7.81		
6.75	20.25	1.13	3.38	5.62	16.87	2.81	8.44	2.81	8.43		
7.00	21.00	1.17	3.50	5.83	17.50	2.92	8.75	2.91	8.75		
7.50	22.50	1.25	3.75	6.25	18.75	3.13	9.38	3.12	9.37		
7.75	23.25	1.30	3.88	6.45	19.37	3.23	9.69	3.22	9.68		
8.00	24.00	1.34	4.00	6.66	20.00	3.33	10.00	3.33	10.00		
8.25	24.75	1.38	4.13	6.87	20.62	3.44	10.31	3.43	10.31		
8.50	25.50	1.42	4.25	7.08	21.25	3.54	10.63	3.54	10.62		
8.75	26.25	1.46	4.38	7.29	21.87	3.65	10.94	3.64	10.93		
9.00	27.00	1.50	4.50	7.50	22.50	3.75	11.25	3.75	11.25		
9.25	27.75	1.55	4.63	7.70	23.12	3.85	11.56	3.85	11.56		
9.50	28.50	1.59	4.75	7.91	23.75	3.96	11.88	3.95	11.87		
9.75	29.25	1.63	4.88	8.12	24.37	4.06	12.19	4.06	12.18		
10.00	30.00	1.67	5.00	8.33	25.00	4.17	12.50	4.16	12.50		
10.20	30.60	1.70	5.10	8.50	25.50	4.25	12.75	4.25	12.75		
10.25	30.75	1.71	5.13	8.54	25.62	4.27	12.81	4.27	12.81		
10.50	31.50	1.75	5.25	8.75	26.25	4.38	13.13	4.37	13.12		
11.00	33.00	1.84	5.50	9.16	27.50	4.58	13.75	4.58	13.75		
11.25	33.75	1.88	5.63	9.37	28.12	4.69	14.06	4.68	14.06		
11.50	34.50	1.92	5.75	9.58	28.75	4.79	14.38	4.79	14.37		
11.75	35.25	1.96	5.88	9.79	29.37	4.90	14.69	4.89	14.68		
12.00	36.00	2.00	6.00	10.00	30.00	5.00	15.00	5.00	15.00		
12.25	36.75	2.05	6.13	10.00	30.00	5.00	15.00	5.20	15.62	\$0.20	\$0.62
12.50	37.50	2.09	6.25	10.00	30.00	5.00	15.00	5.41	16.25	.41	1.25
12.75	38.25	2.13	6.38	10.00	30.00	6.00	15.00	5.62	16.87	.62	1.87
13.00	39.00	2.17	6.50	10.00	30.00	5.00	15.00	5.83	17.50	.83	2.50
13.25	39.75	2.21	6.63	10.00	30.00	5.00	15.00	6.04	18.12	1.04	3.12
13.50	40.50	2.25	6.75	10.00	30.00	5.00	15.00	6.25	18.75	1.25	3.75
13.75	41.25	2.30	6.88	10.00	30.00	5.00	15.00	6.45	19.37	1.45	4.37
14.00	42.00	2.34	7.00	10.00	30.00	5.00	15.00	6.66	20.00	1.66	5.00
14.25	42.75	2.38	7.13	10.00	30.00	5.00	15.00	6.87	20.62	1.87	5.62
14.50	43.50	2.42	7.25	10.00	30.00	5.00	15.00	7.08	21.25	2.08	6.25
14.75	44.25	2.46	7.38	10.00	30.00	5.00	15.00	7.29	21.87	2.29	6.87

Table of monthly and quarterly division of rates of pension under the act of February 20, 1905—Continued.

Rate.		Reserve for pensioner's benefit.		To dependent wife, minor children, or parents.		To nondependent wife or minor children.		To hospital for board and maintenance, and to pensioner's credit if relatives non-dependent.		To hospital for board and maintenance, and to pensioner's credit if relatives dependent.	
Per month.	Per quarter.	Per month.	Per quarter.	Per month.	Per quarter.	Per month.	Per quarter.	Per month.	Per quarter.	Per month.	Per quarter.
\$15.00	\$45.00	\$2.50	\$7.50	\$10.00	\$30.00	\$5.00	\$15.00	\$7.50	\$22.50	\$2.50	\$7.50
15.25	45.75	2.55	7.63	10.00	30.00	5.00	15.00	7.70	23.12	2.70	8.12
15.50	46.50	2.59	7.75	10.00	30.00	5.00	15.00	7.91	23.75	2.91	8.75
15.75	47.25	2.63	7.88	10.00	30.00	5.00	15.00	8.12	24.37	3.12	9.37
16.00	48.00	2.67	8.00	10.00	30.00	5.00	15.00	8.33	25.00	3.33	10.00
16.25	48.75	2.71	8.13	10.00	30.00	5.00	15.00	8.54	25.62	3.54	10.62
16.50	49.50	2.75	8.25	10.00	30.00	5.00	15.00	8.75	26.25	3.75	11.25
16.75	50.25	2.80	8.38	10.00	30.00	5.00	15.00	8.95	26.87	3.95	11.87
17.00	51.00	2.84	8.50	10.00	30.00	5.00	15.00	9.16	27.50	4.16	12.50
17.25	51.75	2.88	8.63	10.00	30.00	5.00	15.00	9.37	28.12	4.37	13.12
17.50	52.50	2.92	8.75	10.00	30.00	5.00	15.00	9.58	28.75	4.58	13.75
17.75	53.25	2.96	8.88	10.00	30.00	5.00	15.00	9.79	29.37	4.79	14.37
18.00	54.00	3.00	9.00	10.00	30.00	5.00	15.00	10.00	30.00	5.00	15.00
18.50	55.50	3.09	9.25	10.00	30.00	5.00	15.00	10.41	31.25	5.41	16.25
18.75	56.25	3.13	9.38	10.00	30.00	5.00	15.00	10.62	31.87	5.62	16.87
19.00	57.00	3.17	9.50	10.00	30.00	5.00	15.00	10.83	32.50	5.83	17.50
19.25	57.75	3.21	9.63	10.00	30.00	5.00	15.00	11.04	33.12	6.04	18.12
19.50	58.50	3.25	9.75	10.00	30.00	5.00	15.00	11.25	33.75	6.25	18.75
20.00	60.00	3.34	10.00	10.00	30.00	5.00	15.00	11.66	35.00	6.66	20.00
20.50	61.50	3.42	10.25	10.25	30.75	5.13	15.38	11.95	35.87	6.83	20.50
21.00	63.00	3.50	10.50	10.50	31.50	5.25	15.75	12.25	36.75	7.00	21.00
21.25	63.75	3.55	10.63	10.63	31.88	5.32	15.94	12.38	37.18	7.07	21.24
21.50	64.50	3.59	10.75	10.75	32.25	5.38	16.13	12.53	37.62	7.16	21.50
22.00	66.00	3.67	11.00	11.00	33.00	5.50	16.50	12.88	38.50	7.33	22.00
22.50	67.50	3.75	11.25	11.25	33.75	5.63	16.84	13.12	39.37	7.50	22.50
23.00	69.00	3.84	11.50	11.50	34.50	5.75	17.25	13.41	40.25	7.66	23.00
23.50	70.50	3.92	11.75	11.75	35.25	5.88	17.63	13.70	41.12	7.83	23.50
24.00	72.00	4.00	12.00	12.00	36.00	6.00	18.00	14.00	42.00	8.00	24.00
25.00	75.00	4.17	12.50	12.50	37.50	6.25	18.75	14.58	43.75	8.33	25.00
27.00	81.00	4.50	13.50	13.50	40.50	6.75	20.25	15.75	47.25	9.00	27.00
30.00	90.00	5.00	15.00	15.00	45.00	7.50	22.50	17.50	52.50	10.00	30.00
36.00	108.00	6.00	18.00	18.00	54.00	9.00	27.00	21.00	63.00	12.00	36.00
40.00	120.00	6.67	20.00	20.00	60.00	10.00	30.00	23.33	70.00	13.33	40.00
46.00	138.00	7.67	23.00	23.00	69.00	11.50	34.50	26.88	80.50	15.33	46.00
50.00	150.00	8.34	25.00	25.00	75.00	12.50	37.50	29.16	87.50	16.66	50.00
55.00	165.00	9.17	27.50	27.50	82.50	13.75	41.25	32.08	96.25	18.33	55.00
60.00	180.00	10.00	30.00	30.00	90.00	15.00	45.00	35.00	105.00	20.00	60.00
72.00	216.00	12.00	36.00	36.00	108.00	18.00	54.00	42.00	126.00	24.00	72.00
100.00	300.00	16.67	50.00	50.00	150.00	25.00	75.00	58.33	175.00	33.33	100.00

## EXHIBIT--WHITE, No. 3.

DEPARTMENT OF THE INTERIOR,  
GOVERNMENT HOSPITAL FOR THE INSANE,  
Washington, D. C., —, 190—.

(In re —.)

DEAR —: I write to inform you that there remains a balance of money upon the hospital books to the credit of the above-named person, who was formerly under treatment here. If you will communicate with me, I shall be pleased to furnish you further information in regard to the matter.

Very respectfully,

WM. A. WHITE,  
Superintendent.

## EXHIBIT—HUMMER, No. 1.

## RULES AND REGULATIONS OF THE BOARD OF VISITORS OF THE GOVERNMENT HOSPITAL FOR THE INSANE.

## RULES AND REGULATIONS.

## CHAPTER I—DUTIES OF SUPERINTENDENT.

1. The superintendent, being the chief executive officer of the hospital and required to reside on the premises and to devote his entire time to the duties of his position, is the responsible head of the institution, from whom all authority for its control shall emanate, and in whose name and by whose authority all persons employed in any capacity at the hospital will discharge the duties respectively assigned them.

2. Subject to the supervisory authority of the Secretary of the Interior, and the civil service rules so far as applicable, and with the approval of the Board of Visitors, he shall engage all the necessary employees in all departments of the hospital and assign them to their various duties. He may discharge any employee not within the classified service whenever in his judgment the best interests of the hospital require it, keeping a record of the date of all such removals and the reasons therefor, which action shall be subject to the revision of the board. Removals of persons within the classified service shall be in accordance with the requirements of the existing civil-service rules. He shall fix the compensation of each and determine the regulations under which increase or reduction may be made in such compensation, with the approval of the Board of Visitors.

3. He shall provide the necessary blanks and have kept in accurate form as complete records as possible of every patient admitted to the hospital. These records shall include, as far as practicable, all data necessary to a complete history of his disease and its proper treatment. It shall be his duty to ascertain that no person is illegally or unjustly confined in the hospital and that no person is refused admission who is legally entitled to treatment therein. He shall cause to be kept an accurate census of all the inmates, with such record of their past history as will enable an accurate identification of each.

4. All correspondence of the institution shall be conducted in the name of the superintendent and by his authority and under his direction.

5. He shall visit all portions of the hospital as often as practicable and shall direct the affairs of the hospital in all its departments. He shall be responsible for and shall direct the medical, moral, and physical treatment of the patients and shall cause such record of their symptoms and treatment to be kept as he may deem likely to promote the interests of science and humanity.

6. The superintendent is authorized to discharge any patient who has recovered and to permit the removal of any patient by the same authority that had ordered his or her admission. He is also authorized, as provided in section 4856 of the Revised Statutes of the United States, on the order of the supreme court of the District of Columbia, or of any judge of said court, to release under bond any patient not charged with a breach of the peace.



7. The superintendent shall make a monthly report to the Secretary of the Interior and the visiting committee of the board of visitors, movement of population in the hospital, of the employment, resignation, and discharge of employees, and of the general condition of the hospital, including the progress of work on all improvements and repairs.

The superintendent shall cause due record to be made of all personal property belonging to patients at the time of admission to the hospital or that may be received thereafter and be responsible for the proper care thereof.

8. In his capacity as "responsible disbursing agent" of the hospital he shall approve all requisitions for supplies, order made or make in person all purchases, direct the fund from which each voucher shall be paid, approve all bills before they are paid, and satisfy himself that all articles described therein have been applied to the uses of the hospital. He shall receive and properly account for all money received by him as superintendent or agent, and, as required by law, shall be responsible for the safe-keeping and proper use of all the supplies for the hospital, and shall use due diligence to insure efficient service from all officers and employees.

9. The provisions of the acts of March 15 and July 7, 1898, relative to leaves of absence are applicable to all officers and regular employees at the Government Hospital for the Insane, such leave to be allowed under such regulations as the superintendent of the Government Hospital for the Insane, subject to the approval of the board of visitors, deems essential to the orderly and efficient conduct of the institution under his supervision.

10. To this end he is empowered, subject to approval by the board, to make any additional rules and regulations, supplementary to and not inconsistent with those included herein which he may deem necessary to the efficient management of the affairs of the institution; and all officers and employees accepting positions in the service at the Government Hospital for the Insane shall thereby agree to conform to the requirements of said rules and regulations, including those governing the special hours of duty, and service on Sundays and holidays designated therein.

#### CHAPTER II.—*Duties of subordinate officers.*

1. The officers of the hospital, in addition to those already described, shall be assistant physicians, junior assistant physicians, night medical officer, purchasing agent, matron, and chief of training school.

2. Assistant physicians shall be physicians in good standing in their profession and graduates of a regular school of medicine of recognized authority. They shall have charge, under the direction of the superintendent, of the medical treatment of the patients, visiting each patient at least once daily, and making all necessary special visits to patients whose condition may require it. They shall be assigned to special departments by the superintendent and be responsible to him for the care and treatment of all patients in their department.

3. They shall also have a general charge of the nurses, attendants, and domestics in their department, directing their duties, using diligence to require from each efficient service, and directing generally the care of the apartments occupied by patients and of all portions of the

hospital under their supervision. They shall promptly report to the superintendent any violation of the rules by any employee and any neglect of duty which may come to their knowledge.

4. They shall assist at all the entertainments given for the benefit of the patients, be present at chapel services, and in every manner possible contribute as far as lies in their power toward the successful administration of the affairs of the hospital.

5. Junior assistant physicians and the night medical officer shall have charge of such portion of the medical treatment of patients and the keeping of records as may be assigned to them by the superintendent.

6. The purchasing agent shall be the regular agent for the purchase of all supplies for the hospital. He shall be furnished with requisitions for all the necessary supplies, approved by the superintendent, and, as authorized by him, shall make purchase, on the most advantageous terms possible, of all articles required for the use of the hospital. He shall use due diligence in procuring articles of good value and at the best possible price, shall see that all articles are properly delivered, and approve all vouchers, and require bills to be sent with every purchase. He shall direct the safe-keeping of all supplies at the hospital and take the necessary precaution to see that they are applied to the proper use of the institution.

7. He shall give bond to the superintendent in the sum of \$5,000 conditional on the faithful performance of the duties of his position, and nothing in these regulations shall be construed as abridging the liberty of the superintendent to make, in person, such purchases as he may deem necessary or advantageous.

8. When articles have been engaged by yearly contract through the honorable Secretary of the Interior, the purchasing agent shall order such as may be required from time to time, on requisitions duly approved by the superintendent, and shall use care to see that they are in every respect the equal of the sample for which the contract was made, before permitting them to be delivered at the hospital.

9. The matron shall have charge of all the domestic departments of the hospital, under the direction of the superintendent, including the kitchens, dining rooms, laundry, and employees' quarters. She shall have general supervision of the work of all employees in these departments, enforce proper discipline among them, and sign all requisitions for supplies needed in their work.

10. She shall issue all supplies to the sewing rooms and see that all manufactured articles made therein are properly accounted for. She shall have charge of the repairs of all linen and clothing and direct the help required in this work, and shall be responsible generally for the condition of the bedding and linen in all parts of the hospital.

11. The chief of the training school shall be a woman, a trained nurse of experience, and with the education necessary to discharge successfully the duties of the position. She shall have charge of the school of instruction for nurses, and in conjunction with the superintendent and the medical staff shall give the course of instruction, as required by the superintendent. It shall be the duty of the medical officer to cooperate in this work and to conduct such portions as may be set them to do by the superintendent.

12. The chief nurse shall also have charge of the work of the trained nurses and of those taking instruction in the wards of the hospital. She shall, under the supervision of the medical staff, direct the special

nursing of all patients requiring such care in all departments of the hospital. She shall assign all such nurses to their respective duties and be responsible for the manner in which they discharge them, and for their conduct generally in the hospital.

13. All the officers named in this chapter shall reside at the hospital and devote their entire time to the duties of their respective positions.

14. They shall be accountable to the superintendent for all their acts in relation to the hospital, and shall notify the superintendent and receive his consent whenever they desire to be absent from the hospital.

15. As in unity alone there is strength, every officer of the institution is expected to be a loyal friend to the management, faithful always to its best interests, and true to his conviction of duty. He shall discourage division and ill feeling among the members of the official staff, maintaining at all times and under all circumstances such courteous attitude, one toward another, and such dignity of character as is befitting to those engaged in such a noble work for humanity.

#### CHAPTER III.—*Duties of employees.*

1. On accepting positions at the hospital all employees will be required to sign an agreement to obey all the regulations of the institution and to abide by the decision of the superintendent in all things that affect the duties of their positions.

2. Uniform courtesy and consideration toward their superior officers, their fellow employees, and to those in their care and their friends shall be exacted at all times and of every employee.

No profanity and no improper language by employees will be permitted. The use of intoxicating drink of any kind while on duty is strictly prohibited, *and its use to excess at any time, whether on duty or not*, by an employee will be sufficient cause for removal.

3. Two weeks' notice of intention to leave the service will be required of all employees, and such notice will be granted in case it is deemed advisable by the superintendent to discontinue such services, except that in case of discharge of any employee for violation of any rule of the hospital no such notice will be given.

4. Supervisors, attendants and nurses, and all employees whose work requires them to be on duty on Sunday will be granted permission to be absent on each second or third Sunday as their duties may permit. In all these cases permits are to be subject to the decision of the superintendent or his authorized representative and are to be granted in such manner as will prove least detrimental to the service.

5. All nurses employed after a date in the year 1900, to be fixed by the superintendent, will be required to take such course of training as is required to complete the curriculum of the training school for nurses, such course of instruction to extend through two years. At the end of such term each nurse who successfully passes such examinations as are required will be given a certificate to that effect, and each nurse taking such course of instruction and properly answering all its requirements will be given an advance in salary of \$5 per month after the completion of the course.

6. All employees having in their custody keys to any portion of the hospital shall deposit these in the office or leave them in charge of the head of the department in which they are employed whenever they are

absent from the hospital on any leave, and no employee shall leave the hospital at any time without special permission to do so.

7. No one not employed at the hospital will be entertained at the institution by any employee without special permission from the superintendent.

8. The superintendent will establish such additional rules and regulations not inconsistent herewith, describing and defining the duties of the various positions and the hours of service, as from time to time he may deem necessary.

#### CHAPTER IV.—*Supervisors and chief nurses.*

1. Supervisors will have general charge of attendants and nurses in their respective departments. They will note the manner in which each one discharges the duties of his position, and promptly report any violation of the regulations of the hospital.

2. Under the instruction of the physician in charge and subject to his approval they will arrange their time off duty under the rules, and provide such relief service as may be required.

3. They shall take charge of the keys of all attendants and nurses who are off duty and absent from the hospital inclosure. They shall conduct all attendants to their work when they are first employed and instruct them in their duties. They shall furnish each with a copy of the rules and regulations of the hospital; and when they are furnished with a uniform they shall make note, in a book provided for that purpose, of the number of special buttons furnished each therefor. These shall be charged to the employee in question, and a receipt given when they are returned at the time the employee leaves the service of the hospital. Settlement will not be made with any employee on leaving the service until such receipt is shown the financial clerk.

4. Supervisors will take charge of the patients when they are received at the hospital and conduct them to the ward assigned them. They shall carefully search each and take charge of all valuables and all weapons, accounting for them to the proper authority. They shall take a careful memorandum of all the wearing apparel of the patient and see that it is properly marked and registered and delivered to the head attendant of the ward, taking a receipt from him for all the articles delivered to his care.

5. They shall see that each patient is given a bath on the day of his admission, and shall examine carefully for the existence of any marks or bruises on his body, reporting at once to the physician in charge any evidence of such.

6. They will have general charge of the clothing of patients, renewing it as required, and noting its condition at all times. They will give the necessary instructions for its proper care and see that they are faithfully executed.

They shall have general charge of the housekeeping of the ward in all its details, and, with the chief nurse, properly apportion the duties among the separate attendants and nurses, as directed by the physician in charge.

7. At least once each week they shall make a thorough inspection of all bedding and beds and take all necessary precautions to prevent the introduction of vermin. Whenever there is evidence of such in the clothing of patients admitted it shall be at once destroyed by burning.

8. Chief nurses will have immediate charge of the nursing of patients in their respective departments. They shall instruct the nurses under them in each ward in the proper application of all remedies and the dressing of wounds, ulcers, etc. They shall see that proper ward notes are kept in each case designated by the physician in charge, and shall instruct the nurses under them in the preparation of these notes and in the correct noting and recording of all necessary clinical observations.

9. Together with the supervisors they will have general charge of the patients, looking after their comfort and care and giving the necessary instructions for their control. All shall spend as much time as possible among the patients and use every possible means to ascertain the occurrence of any neglect, misconduct, or violation of the rules on the part of attendants or nurses.

CHAPTER V.—*Duties of nurses and attendants.*

1. All attendants who shall have successfully completed the required course of training at the hospital shall be designated as "nurses," and all those who are taking the same course shall be designated "nurses in training."

2. All attendants employed hereafter in the service of the hospital will be employed on a probation of six months, during which time they will be given the minimum wages designated in the schedule of wages for attendants. Any probationer, however, may be discharged during probation for misconduct or evident unfitness or incapacity. At the end of the probation period each attendant will be notified whether his services will be longer required, and he can then leave the service without prejudice and without the usual two weeks' notice if he so desires.

3. If the superintendent decides that his services will be continued, he will then be required to commence the regular course of training in the training school at the earliest convenience of the hospital, and to complete it in the regular manner.

4. The wages of nurses and attendants will be determined by the schedule incorporated in these regulations. Each position will have a maximum wage which will be attained after a definite length of service in the position in question.

5. Wages for attendants, nurses, and supervisors will be as follows:

FOR MALES.		Per month.
Attendants, during the period of probation.....		\$18
Associate attendants, after probation, first year.....		20
For second year.....		22
After two years.....		25
Head attendants, two years' service after probation being requisite for eligibility thereto.....		30
Nurses in training, after probation, first year.....		20
Second year.....		25
Associate nurses, after graduation.....		30
Head nurses, after graduation.....		35
Chief nurses, one in each department except Howard Hall.....	40 to 45	
Supervisors, one in each department except Toner group.....	40 to 45	
Chief supervisors, one in each department.....	50	

## FOR FEMALES.

	Per month.
Attendants, during the period of probation.....	\$14
Associate attendants, after probation, first year.....	16
Second year.....	18
After two years.....	30
Head attendants, two years' service after probation being requisite for eligibility thereto.....	25
Nurses in training, after probation, first year.....	18
Second year.....	20
Associate nurses, after graduation.....	25
Head nurses, after graduation.....	30
Chief nurse, one.....	40 to 45
Supervisor, one.....	35 to 40
Chief supervisor.....	45

6. Attendants and nurses are the guardians of the patients, and they must never lose sight of this responsibility. Their duties are most trying and require the highest type of character for their efficient execution. Their work is exacting to an extreme degree, and it demands great self-control and the exhibition of unusual forbearance and Christian charity.

7. Attendants and nurses will have immediate charge of the patients and their apartments. They will see that the patients are at all times kept as comfortable and clean as their condition will permit. They shall keep them comfortably clothed, bathing them and changing their clothing as frequently as required for this purpose. They shall keep their apartments at all times clean and neat, and free from every contamination which is unpleasant or injurious to health. They shall look carefully after every portion of the housekeeping, including bed making, sweeping, dusting, brightening of floors, hardware, plumbing fixtures, etc. Every portion of the ward shall be kept well aired and of proper temperature and as free as possible from objectionable odor. They shall have especial care of the lavatories and toilet rooms, keeping them thoroughly clean and instructing and training patients in their proper use. They shall provide frequent changes of toweling, and in bathing shall see that each patient has clean water of a proper temperature and sufficient bath towels to properly dry the body before dressing.

They shall always be present in the bathroom when patients are bathing, unless special permit has been granted the patient from the physician in charge to bath alone. They shall assist patients in the bath and in dressing, providing them with clean changes and using all precautions to prevent accident during the bath. They shall not permit more than one patient in the bathroom at one time and not more than two at one time in the dressing room adjoining.

8. They shall take every able-bodied patient out doors for exercise on every suitable day, once or twice, as directed by the physician in charge, chief nurse, or supervisors. They shall direct and encourage patients to assist in the housework and in such work outside the ward as may be assigned, keeping in mind all the time that the work is to be utilized as a feature of the treatment of the patient and that its primary object is improvement and restoration to health of body and mind. They should always work with patients at any work to which they are assigned.

9. Attendants and nurses must arise promptly on the ringing of the bell at 6 a. m. and proceed as soon as practicable to call each patient

and assist him in the morning toilet. They shall see that each is properly washed and dressed and made ready for the morning meal.

10. They shall accompany the patients to the dining room, act as waiters to them, assist such as require assistance, and keep constantly on duty among them during the meal.

11. After the meal they shall return the patients safely to the ward and shall remain continuously among them except as their duties may demand otherwise or during the hours when they are relieved from duty under the rules.

12. They are expected to preserve order among the patients, but in doing so they are expected to use the mildest possible means to accomplish this end. Violent conduct and profane and obscene language on the part of the patient must be prevented as far as practicable.

13. No kicking, striking, shaking, or choking of a patient will be permitted under any circumstances, and any evidence of this will be sufficient cause for discharge. Patients must not be thrown violently to the floor in controlling them, but the nurse or attendant shall call such assistance as will enable him to control the patient without injury and as far as possible without severe struggling.

14. Should it be deemed necessary to isolate a patient for his protection or to prevent injury or disturbance of others, the fact shall be immediately reported in person or by telephone to the physician in charge or the chief nurse or supervisor, together with the reasons therefor, and such isolations shall not be continued unless it is approved by the authority to whom it is reported.

15. No mechanical restraint of any kind shall be used without first securing the consent of the physician in charge therefor.

16. The personal care of patients, including feeding, bathing, dressing, and undressing, and the administration of medicines must never be intrusted to other patients, and no patient shall be taken out of the ward or cottage for work unless special permission has been granted by the physician in charge.

17. In wards with two attendants or nurses at least one, and in wards with four at least two, shall be always present among the patients, and all are expected to spend their time there whenever their duties will permit. Loitering or resting in the private bedrooms of nurses or attendants will not be permitted during the hours that they are on duty.

18. Keys shall not be intrusted to patients under any circumstances, unless permission therefor is granted by the physician in charge. Nurses and attendants will each be held responsible for the keys given them, and they will leave them in charge of the supervisor or chief nurse whenever they leave the hospital inclosure, and shall deliver them at the central office when they quit the service.

19. No one not connected with the ward or engaged in necessary duties therein shall be permitted to enter it without consent is first obtained from the supervisor, chief nurse, or physician in charge, and attendants and nurses shall not visit other wards or portions of the hospital, except in the transaction of their necessary duties, without first obtaining consent so to do from one of these.

20. Nurses and attendants are expected to know the whereabouts of their patients at all times. They shall keep accurate account of them at each meal and on going out and returning to the ward. They shall report promptly to the chief nurse, supervisor, or physician in charge

the absence of anyone as soon as discovered. If a patient escapes through the negligence of a nurse or attendant, the superintendent shall require the nurse at fault to bear the expense incurred in returning the patient to the hospital. It may also be sufficient cause for discharge, as the superintendent may determine.

21. Patients known to be suicidal shall never be left out of sight of a nurse under such circumstances as might permit the execution of such a purpose. Patients shall be as frequently searched for concealed weapons as may be necessary, and bedrooms must be carefully examined each evening before the patient retires.

22. All patients shall bathe at least once each week, and such patients as require it shall be shaved once or twice each week, as opportunity may offer. The hair shall be kept neatly trimmed and in good order.

23. The conduct and conversation of a patient must never be ridiculed or spoken of slightly or jestingly to visitors. They must always be addressed kindly and respectfully, and all proper questions must be courteously answered.

Nurses and attendants must never scold or threaten, and must never quarrel or wrangle with patients. They must never ridicule the delusions of patients, and must avoid discussing the conduct of one patient with the others.

24. Gossip among attendants and nurses and all unseemly quarreling is strictly prohibited.

25. Patients shall retire at 8 p. m., except in such cases as may be given special permission by the physician in charge, in which case they may be permitted to retire at any later hour until 9 p. m.; but no patient in ordinary good health shall be permitted to retire earlier than 7.30 p. m., unless ordered so to do by the physician in charge.

26. Nurses and attendants will be required to wear such uniform as may be designated by the superintendent and officers of the hospital, and this shall be worn at all times when on duty. The special buttons used in the manufacture of this uniform will be charged to the nurse or attendant using them, and shall be returned to the supervisor on leaving the service. This uniform shall be procured at the end of the probationary period.

27. Such division of labor as will best conduce to efficient and economical administration of the affairs of the ward shall be arranged by the physician in charge, the chief nurse, and the supervisor among nurses and attendants in each ward. It shall be considered the chief duty of the nurses to look after the personal care of the patients, including their dressing and beds, while the especial duty of the attendants will be to look after the care of the ward proper, including clothing rooms, bathrooms, lavatories, closets, and dining rooms. Where nurses and attendants are both employed in the same ward they will be expected to cooperate and assist each other whenever possible, and the physician, chief nurse, and supervisors will make such distribution of work as shall be equitable and fair to each.

28. In the female department it is hoped that in the course of time the work of the wards will be divided entirely between nurses and domestics. In such case the domestics shall go on duty at 6 a. m. and remain on duty until 4.30 p. m., except that the one in charge of the dining room shall remain until after the evening meal is served and the dining-room work completed, the same person being allowed two hours off duty during the afternoon. They will do the scrubbing and



cleaning of floors, walls, and windows, assist in bed making, and have charge of the work of the closets, lavatories, bathrooms, and dining rooms.

The nurse in such case will have full charge of the care and control of the patients, including their dressing, bathing, clothing, exercising, and everything relating to their personal comfort and safety.

29. In every ward having nurses the head nurse shall be charged with the responsibility of administering the medicines as directed by the physician, and in wards where no nurses are employed the head attendant may be given this duty if it is deemed advisable by the physician in charge. The medicines, in each ward so designated by the physician in charge, shall be kept in a neat case in the room of the head nurse or head attendant, strictly under lock, and the nurse or attendant in charge of it shall be held strictly accountable for its safety and its administration as directed.

30. Careful and accurate ward notes shall be kept by the nurses, or in their absence by the head attendant, of every case which may be so designated by the physician in charge. It shall be the duty of the chief of the training school and the chief nurse to instruct nurses and attendants in the proper preparation of these notes, and suitable blanks will be furnished for this purpose.

31. Nurses and attendants will go on duty at the rising hour in the morning and remain on duty until 8 o'clock p. m., except that one-half the number, as near as practicable, shall be permitted two hours during the day for recreation off duty from 1 p. m. to 3 p. m., or at such other hours as may be deemed best in the interest of the service, but this time will not be granted when from any cause another attendant from the same ward is off duty for a day or half day, and the other half shall be granted the evening off duty from 6 p. m. until 10 p. m.

One-half of the nurses and attendants in each ward, being those who have had two hours off duty during the day, shall remain in the ward from 8 p. m. to 10 p. m., except in cases where there are special night nurses on duty, where one day nurse or attendant shall remain on duty after the patients have retired and the night nurses are on duty, between the hours mentioned.

All nurses and attendants will be required to be in their rooms at 10 p. m., except that married attendants who live near the hospital may spend their nights at home on such nights as they are off duty in the evening, with the proviso that they shall be present in the ward for duty at the hour of ringing the bell in the morning.

32. In addition to these hours attendants and nurses will be granted a half day off duty from 1 p. m. to 10 p. m. each second week, or one whole day from 7 a. m. until 10 p. m. each month, and each third Sunday from 7 a. m. to 10 p. m. Attendants will take their half day or day off duty on such days as they would have the evening off duty under the rules.

Approved June 1, 1900.

B. SUNDERLAND,  
*President Board of Visitors.*

Attest:

A. B. RICHARDSON, *Secretary.*

## EXHIBIT—KOBER, No. 1.

[Reprinted from *American Medicine*, Vol. III, No. 26, pp. 1085-1087, June 28, 1902.]

**MILK, BUTTER, AND BUTTER SUBSTITUTES, IN RELATION TO PUBLIC HEALTH.<sup>a</sup>**

(By GEORGE M. KOBER, M. D., of Washington, D. C., Professor of Hygiene, School of Medicine, Georgetown University.)

Much has been said and written on the subject of milk in relation to public health during the past ten years; indeed, the production of pure milk may well be considered one of the most important problems which confront the sanitarian.

Numerous instances have been observed in which outbreaks of typhoid fever, scarlet fever, and diphtheria, by their sudden and explosive character, affecting families living in streets and localities supplied by the same milkman, naturally pointed to the milk supply as a common cause, but not until 1857 was it pointed out definitely, through Dr. Michael Taylor, an English physician, that cow's milk might serve as a medium for spreading typhoid fever from a dairy where the disease prevailed. In 1867 he also showed that scarlet fever might be distributed in the same way. In 1877 Mr. Jacob traced a diphtheria epidemic at Sutton to the milk supply, and in 1872 Macnamara traced an outbreak of cholera at Calcutta to an infected dairy. These facts could not fail to sharpen the powers of observation in others, and in consequence similar outbreaks were reported more frequently, so that Mr. E. Hart, the editor of the *British Medical Journal*, was enabled to present to the International Medical Congress, held in London in 1881, the history of 50 outbreaks of typhoid fever, 15 of scarlet fever, and 7 of diphtheria, all traceable to the milk supply. In a similar communication made before the International Medical Congress at Paris in 1900, I presented my conclusions based upon the tabulated histories of 330 epidemics spread through the medium of the milk supply.

It has been demonstrated by numerous bacteriologists that disease germs may not only survive, but in many instances actually proliferate, in the milk; and it is not a difficult matter to point out the many ways by which these germs gain access, especially when some of the employees are also engaged in nursing the sick, or are suffering themselves from some mild infection while continuing their duties, or are convalescent from the disease. It is quite conceivable how animals wading in filth and sewage-polluted water may infect the udder with the germs of typhoid fever, and through it the milk. We can also appreciate how infected water may convey the germs by the washing of the utensils or by deliberate adulterations. Infection may also take place through the agency of scrubbing brushes, dishcloths, exposure to infected air, or flies.

Of the 195 epidemics of typhoid fever tabulated by me, there is evidence in 148 of the disease having prevailed at the farm or dairy. In 67 instances the infection probably reached the milk by percolation of the germs into the well water with which the utensils were washed; in 16 of these the intentional dilution with water is a matter of evidence. In 3 instances *bacillus coli communis* and typhoid germs were

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<sup>a</sup> Read before the American Social Science Association, April 24, 1902.

demonstrated in the suspected water. In 7 instances infection is attributed to the cows wading in sewage-polluted water and pastures. In 24 instances the dairy employees also acted as nurses. In 10 instances the patients, while suffering from a mild attack or during the onset of the disease, continued their work, and those who are familiar with the personal habits of the average dairy hands will have no difficulty in surmising the manner of direct digital infection. In 1 instance the milk tins were washed with the same dishcloth used among the fever patients. In 2 instances dairy employees were connected with the night-soil service, and in another instance the milk had been kept in a closet in the sick room.

Of the 39 epidemics of scarlet fever the disease prevailed in 68 instances either at the dairy or milk farm. In 6 instances persons connected with the dairy either lodged in or had visited infected houses. In 2 instances the infection was conveyed by means of infected bottles or milk cans left in scarlet-fever houses. In 17 instances the infection was conveyed by persons connected with the milk business while suffering or recovering from the disease, and in at least 10 instances by persons who acted as nurses while handling the milk. In 3 instances the milk had been stored in or close by the sick room. In 1 instance the cans had been wiped with an infected cloth. In 19 instances the infection was attributed to disease of the milch cows, such as puerperal fever and inflammation of the udder and teats, but these latter outbreaks were probably not genuine scarlet fever, but a so-called streptococcus or staphylococcus infection, the symptoms of which closely resemble those of scarlet fever.

Of the 36 outbreaks of diphtheria tabulated, there is evidence that the disease prevailed at the dairy or farm in 13 instances. In 3 instances the employees continued to handle the milk while suffering themselves from the disease. In 12 instances the disease is attributed directly to the cows having inflammatory conditions of the teats and udders. These instances, however, may be regarded as typical examples of streptococcus and staphylococcus infection, giving rise to a form of follicular tonsilitis or pseudodiphtheria, often difficult to distinguish clinically from true diphtheria or scarlet fever.

There is much reason for assuming that tuberculosis has been spread through the milk supply and on pages 315-328, Report of the Health Officer of the District of Columbia, 1895, Dr. S. C. Busey and I have collected considerable clinical evidence on this subject, with the details of which I need not now burden you.

Apart from this, it has been demonstrated that milk is the most frequent cause of cholera infantum and the diarrheal diseases in children, especially when such milk is produced under unclean conditions, which, together with a high temperature, favor rapid germ proliferation and the production of toxins. Milk may also be rendered unfit for use and cause sickness in children by reason of improper food of the animal, or while the animal is being treated with strong remedial agents, which may be excreted in the milk, and, finally, milk may be moribific as the product of a diseased animal. I have elsewhere pointed out that inflammatory conditions of the udder and teats, especially the conditions known as garget, are doubtless responsible for a large number of cases of pseudodiphtheria and other septic infections. The milk of animals suffering from acute specific enteritis, puerperal and

other septic fevers, foot-and-mouth disease, cowpox, anthrax, pleuropneumonia, rabies, and tetanus has also been known to produce sickness in the consumer.

A review of the milk legislation shows that the laws which have been enacted deal largely with the prevention of milk sophistication, and those who are familiar with the surroundings of our milk farms and the habits of the average dairy employees need no argument for the necessity of sanitary reforms and additional legislation upon this subject. Since it is doubtful, however, whether legislation in matters of this kind is ever as effective as public education, the establishment of sanitary dairies and creameries should be encouraged. Such institutions, in addition to official control, are subject to frequent unannounced inspections by members of voluntary milk commissions and have doubtless a very useful future.

*Butter as a carrier of disease.*—Since milk is known to be a carrier of disease germs, under the conditions referred to, the possibility that butter may act in the same way has been considered, and the evidence on this subject is as follows:

It has been shown by Hugo Laser<sup>a</sup> that when cholera bacilli are implanted in butter they remain alive and virulent for thirty-two days, and those of typhoid from three to four weeks. Gasperini found viable germs of tuberculosis in butter 128 days old, and V. A. Moore, chief of the division of animal pathology, in the Yearbook of the United States Department of Agriculture for 1895, page 431, describes an experiment in his laboratory which shows that tubercle bacilli will remain virulent for more than ninety days; the guinea pig, inoculated with a piece of this butter the size of a small pea, died of tuberculosis ninety-seven days after the infection.

Brusaferro, in 1891, produced tuberculosis in a rabbit through the injection of butter made from the milk of a cow with a tuberculous udder.

Roth, in 1894, got similar results and found, moreover, that 2 out of 20 market samples of butter used by him yielded positive results. Schuchardt got negative results from 42 samples, while Obermüller<sup>b</sup> found the bacillus in every sample of Berlin butter used in his first experiments, and in his second series, in 1899, when he used only the watery fluid of the butter obtained with the centrifuge, he found in 4 samples, of 10 from the same source as his first lot, evidence of the presence of genuine tubercle bacilli. Petri, one of the experts on food for the German Imperial Health Office, in 1898 found the genuine tubercle bacillus in 32.4 per cent, a bacillus resembling the tubercle bacillus in 32.4 per cent, while only 30.4 per cent of the samples were free from either organism. Gröning, another expert, found the tubercle bacillus in 8 of 17 samples. Korn found them in 32.5 per cent of the samples purchased at Freiburg, and Dr. C. Coggi in only 2 out of 100 samples purchased at Milan. Dr. Lydia Rabinowitsch<sup>c</sup> in 80 samples of butter collected at Berlin and Philadelphia found a bacillus resembling the tubercle bacillus in 28.7 per cent of the samples.

We have no evidence that tuberculosis has ever been spread to man through the agency of butter. V. A. Moore states that Steyerthal

<sup>a</sup> Zeitschrift für Hygiene, 1891, 10, S. 513-520.

<sup>b</sup> Giornale della Reale Soc. Ital. Igien in January, 1890.

<sup>c</sup> Hyg. Rundschau, 1899, No. 2.

and Konel have pointed out several cases of these diseases which were traced to the consumption of butter. Fröhner has shown that a disease of cattle in Europe known as foot-and-mouth disease, and which is communicable to man, has been transmitted through butter made from the milk of cows affected with that malady. I have not been able to verify these statements, but we have evidence that the germs of tuberculosis may remain viable in butter for one hundred and twenty-eight days, and, as Doctor Moore justly remarks, although the number of reported cases of infectious diseases in which the contagion was introduced through butter is not large, it is enough to show the possibility of contracting disease by the consumption of this common article of food. These facts are of importance when we realize that the production of butter in the United States amounts to 1,500,000,000 pounds per annum, and that butter, like milk, is an almost universal article of food. The remedy is simple enough, and consists in the pasteurization of the cream and the addition of certain butter cultures in order to restore the original aroma.

*Butter substitutes.*—In the face of such evidence it is not surprising that scientific men should have given considerable attention to the so-called butter substitutes, more familiarly known as butterine and oleomargarine.

In 1868 Mege Mouries, at the instigation of the French Government, undertook experiments for the purpose of securing a substitute for butter at a less cost and which might be used by the navy and the wage-earners of France. This original process, according to Dr. E. A. de Schweinitz, of the Biochemic Laboratory, Bureau of Animal Industry, Department of Agriculture, Yearbook for 1895, was patented in the United States in 1873.

According to Mr. Miller, manager of the butterine department of one of the packing companies of Kansas City, their product consists of oleo oil, neutral lard, butter, cream, milk, and salt; highly refined cotton-seed oil is sometimes used in limited quantities in the cheapest grades. Oleo oil is made from caul fat, the richest and choicest fat of the beef. This fat amounts to about 40 pounds to the animal. It is taken out before the animal is skinned, thoroughly washed and thrown into a vat of ice water to stand until the following day; then it is cut up fine and cooked. The fat is cooked and placed in linen cloths and the oil is extracted in a hydraulic press. The residue in the cloths, after pressing it, is commercially known as stearin. The tallow element is therefore effectually removed. Neutral lard is obtained from the leaf lard of the pig. The leaf, amounting to about 5 or 6 pounds to the pig, is taken out as soon as the animal is killed, thoroughly washed, and put into a freezer for twenty-four hours. It is then cut into shreds and cooked, and after straining becomes snowy white. Both pigs and cattle are examined by Government inspectors before and after killing, so that diseased animals are excluded.

Oleo and neutral lard, therefore, are the basis of the so-called oleomargarine or butterine. These are churned with cream or milk, salted and colored with annatto or butter color, run through cold water, worked in a butter worker, and placed in suitable packages and labeled, according to the United States laws, "Oleomargarine."

According to a report of the Commissioner of Internal Revenue, May 14, 1900, the following are the percentages of ingredients used

in the production of oleomargarine in the United States for the fiscal year ending June 30, 1899:

	Per cent.		Per cent.
Neutral lard.....	34.37	Stearin .....	.07
Oleo oil.....	26.82	Glucose.....	.03
Cotton-seed oil.....	4.77	Milk.....	15.55
Sesame.....	.53	Salt.....	7.42
Coloring matter.....	.16	Butter oil.....	1.76
Sugar.....	.12	Butter.....	1.72
Glycerine.....	.01	Cream.....	3.86

Those who are familiar with the manufacture of oleo oil, neutral lard, and the process of making oleomargarine can not fail to have been impressed with the fact that nothing but the most wholesome and pure fats are used, and that the most scrupulous precautions as regards cleanliness are observed in the manipulations. This extends not only to the material, the utensils, and the workrooms, but also to the person and clothing of the employes, and I can cheerfully corroborate the testimony of Doctor Ames, of the United States Navy, when he declared before the Senate committee (pp. 348-350) that the manufacture of butterine in properly constructed factories is much cleaner than the manufacture of butter, and that he has found the factories of Kansas City nearly perfect in that respect. It should be more generally used and not looked upon as an inferior article and makeshift for butter, when it is really superior.

*Chemical Composition of Butter and Oleomargarin.*

	Fat.	Casein.	Sugar.	Salt.	Water.
	<i>Per cent.</i>	<i>Per cent.</i>	<i>Per cent.</i>	<i>Per cent.</i>	<i>Per cent.</i>
Butter.....	81.36	1.95	1	5.41	11.27
Oleomargarin .....	84.76	.74	.....	5.49	9.01

The great distinction between butter fat and margarin fat lies in the fact that butter fat contains nearly 8 per cent of the volatile fats, while the margarin has about 5 per cent. In the analysis of these substances this difference is made use of.

*Wholesomeness and digestibility of oleomargarine.*—Uffelmann, professor of hygiene, as early as 1890, reported that butterine is nearly as digestible as butter, fully 96 per cent being utilized, and after quoting the experiments on this point of Sell, a food expert of the German health office, declared that no objections should be urged against its use so long as it is properly prepared from wholesome fats and sold under its real name.

Prof. H. W. Wiley, chief chemist of the United States Department of Agriculture, testified before the Senate Committee on Manufactures on adulteration of food products (pp. 14-16) that from a nutritive point of view all the fats and oils used as food have nearly the same value as heat producers. Butter fat has a heat value of a little more than 9,000 calories per gram, while the beef fat of oleomargarine has a slightly higher heat value, but the butter fat is a little more easy of digestion, so that there is practically no difference in the value of the two fats in the human economy. Cotton-seed oil has practically the same heat value as oleomargarine, and is probably a little easier of

digestion. Doctor Wiley considers mixtures of animal fats and vegetable oils to be perfectly wholesome, but objects to the payment of fancy prices by persons in straitened circumstances who suppose they are getting butter when they are not.

*Comparative digestibility of butter and oleomargarine.*—The most valuable experiments as to the relative digestibility of butter and oleomargarine were made by Adolph Mayer<sup>a</sup> in 1883, N. Kienzel<sup>b</sup> in 1898, and H. Lühring,<sup>c</sup> with the following results:

	A. Mayer.	N. Kienzel.	H. Lühring.	Average of all experiments.
Digestibility of:	<i>Per cent.</i>	<i>Per cent.</i>	<i>Per cent.</i>	<i>Per cent.</i>
Butter .....	98.40-97.10	95.65	95.69	96.96
Oleomargarine.....	96.40-96.80	95.64-95.72	96.98-96.70-96.98	96.27

From these feeding experiments it would appear that, while 97 per cent of the natural butter is digested, the digestibility of the artificial product is only about 0.7 per cent less; in other words, the two are practically alike in point of digestibility.

Professor Jolles, in a report to the Imperial Academy of Sciences, in Vienna, March, 1894, arrived at a similar conclusion. Hultgren and Lundergren, the Swedish physiologists, and Wibbens and Huizenga, from the Physiological Institute of Berlin, offer similar testimony. The last-named authors conclude their article in *Archiv für die gesammte Physiologie*, lxxxiii, February, 1901, page 609, by saying: "Everybody has to cut his coat according to the cloth, and it is therefore a great blessing for all mankind that those who have to deny themselves the regular use of natural butter will find in artificial butter a wholesome and cheap substitute."

*Oleomargarine as a carrier of disease.*—I have carefully searched the annals of medical literature for opinions opposed to the above formidable testimony, and find that Morgenroth<sup>d</sup> has subjected oleomargarine to an investigation for the presence of tubercle bacilli, since milk is used in its manufacture, and found these organisms in 9 out of 20 samples. Doctor de Schweinitz, in the paper already quoted, expresses the belief that the germs of tuberculosis can be transmitted in oleomargarine, and bases this conclusion upon a number of inoculation experiments upon guinea pigs with different samples of oleomargarine, and refers to five infections. He does not give the total number of experiments, but says: "A number of other guinea pigs have been inoculated with different samples of oleomargarine, but at this writing (after eight months) have not contracted disease from the oleomargarine inoculation. Two of the samples which caused disease in the animals were made at a factory where the material used may have been questionable in character."

On the whole it is surprising that the evidence is not stronger against this food product, which has doubtless been subjected to the most rigid sanitary investigation by scientists and food experts, and who, on

<sup>a</sup> *Zeitschrift für Hyg. and Infectionskr.*, xxvi, S. 90.

<sup>b</sup> *Landwirth, Versuchs-Anstalt*, pp. 215-232.

<sup>c</sup> *Oest. Chem. Zeitung*, 1, pp. 198-202.

<sup>d</sup> *Zeitschrift für Untersuch. der Nahr-und Genussmittel*, June, 1899, S. 484.

account of a general prejudice against all artificial products, would not hesitate to record adverse opinions. Government inspection already extends to pigs and cattle before and after killing, and if the officers perform their duty and all the ingredients, including the milk, are pasteurized, as I believe they now are in the manufacture of butterine, the possibility of transmitting infectious diseases in this food product is certainly less than with genuine butter, unless made from pasteurized cream.

As a teacher of hygiene I have urged upon my students for years to bring the merits and nutritive value of this foodstuff to the attention of the public, and in the interest of the wage-earners of this country to correct, as far as possible, the prejudice which has been created against the use of this product, provided always it is sold under its true name and at its real value. In this opinion I am glad to be supported by the highest scientific authorities in this country and abroad. Professor Schweitzer, of the Missouri State University, in his testimony before the Senate committee, states that careful physiologic experiments reveal no difference whatever in palatability and digestibility between butter and the brand of butterine which he has examined. Professor Barker, of the University of Pennsylvania, considers butterine quite as valuable a nutritive agent as butter. Professor Johnson, of Yale University, says that for all the ordinary and culinary purposes it is the full equivalent of good butter made from cream, and regards the manufacture of oleomargarine as a legitimate and beneficent industry. Prof. J. S. W. Arnold, of the medical department, University of New York, characterizes it as "a blessing for the public, and in every way a perfectly pure, wholesome, and palatable article of food." Henry Morton Stevens, Institute of Technology, New Jersey; J. C. Caldwell, of the chemic laboratory, Cornell University; Henry A. Mott, of New York; W. O. Atwater, Wesleyan University, Connecticut, have all offered similar testimony.

It is a matter of special satisfaction to note that Coplin and Bevan, in their *Manual of Practical Hygiene*, Philadelphia, 1892, and Professor Harrington, of Harvard, in his *Manual of Practical Hygiene*, 1901, devote several pages to the consideration of this subject and the misrepresentation concerning butter substitutes.

Owing to the fraudulent sale for butter, oleomargarine and butterine have been subject to a vast amount of restrictive legislation, and yet, after all that has been said or done, the most effective remedy lies in the education of the public, who, if they desire these products, should not hesitate to ask for them by their proper names, and thus avoid deception.

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#### EXHIBIT—EMMONS, No. 1.

MARYLAND HOSPITAL FOR THE INSANE,  
*Catonville, Md., November 16, 1905.*

DEAR DOCTOR: I am in receipt of your favor of the 12th instant, and in reply to your inquiries will state that the per capita cost for the patients in this hospital for the year ending October 31, 1905, was \$192. This includes all the necessary maintenance and general repairs.



The death rate was 5 per cent of the daily average population, and the recoveries amounted to 30 per cent on the number of cases admitted.

Very truly, yours,

J. PERCY WADE,  
*Superintendent.*

Dr. C. M. EMMONS,  
*1100 Pennsylvania avenue SE., Washington, D. C.*

EXHIBIT—EMMONS, No. 2.

OKLAHOMA HOSPITAL FOR THE INSANE,  
*Norman, Okla., November 20, 1905.*

DEAR SIR: I have yours of the 12th instant, and in answer permit me to say that while we care for the Territorial insane it is under contract. The Territory pays us \$200 per year for each patient. Our deaths during the past year have amounted to 8 per cent of the total number treated, while the number discharged amounts to about 25 per cent of the total number.

Hoping this data will be satisfactory, I am,  
Very respectfully,

A. T. CLARK,  
*Superintendent.*

CHARLES M. EMMONS, M. D.,  
*1100 Pennsylvania avenue SE., Washington, D. C.*

EXHIBIT—EMMONS, No. 3.

TOLEDO STATE HOSPITAL,  
*Toledo, Ohio, December 11, 1905.*

DEAR DOCTOR: Owing to absence from home and an unusual tax upon my time, I have not found time to reply to your letter until the present.

The annual per capita cost for patients under our care for the year just passed was \$124.60, which included officers' salaries and the amount drawn from the State treasury for current expenses, but did not include clothing.

The mortality based upon the total number of patients under treatment was 8.22 for men and 7.24 for women. The per cent of recoveries based upon the number of admissions was for men 22.56, for women 28.40. I do not know of anything more misleading than the percentage of recoveries stated in asylum reports. If everyone is discharged recovered who goes out in the world and is able to get along with the assistance of friends, the percentage will be high; but if only such persons were discharged recovered as are fully restored in every way, the percentage would be very much reduced; in fact, I do not think that statistics in reports are of any value.

Yours, truly,

H. A. TOBEY.

Dr. C. M. EMMONS,  
*1100 Pennsylvania Avenue SE., Washington, D. C.*

## EXHIBIT—EMMONS, No. 4.

[Extract from report of State lunatic asylum at Austin, Tex., for the year ending August 31, 1904.]

## DISCHARGES.

During the two years 423 patients have been discharged. This number is unusually high, considering the number of unfavorable cases admitted, and represents 63 per cent of all cases admitted. Of these comparatively few received final discharges when they left the institution. The rest were taken out by friends or relatives on trial, and were later finally discharged. By this means the necessity of a new trial is avoided when it is found necessary to return the patient to the institution. It will be noted that quite a number were discharged who were not restored. These are cases that can be cared for at home with little trouble and no danger to their families, and by getting rid of such cases room has been made for new patients who needed immediate attention. Many more of like character remain, but their relatives are either unable or unwilling to care for them.

TABLE O.—Showing death rate since 1874.

Year.	Treated.	Died.	Rate.
1874.....	169	7	4.14
1875.....	217	9	4.14
1876.....	261	10	3.44
1877.....	365	21	6.26
1878.....	372	12	3.23
1880.....	489	42	9.56
1881.....	509	59	11.59
1882.....	459	34	7.49
1883.....	524	20	3.81
1884.....	707	41	5.80
1885.....	763	63	8.25
1886.....	772	82	10.62
1887.....	730	41	5.61
1888.....	707	35	4.59
1889.....	745	24	3.22
1890.....	747	37	4.95
1891.....	733	33	4.50
1892.....	726	32	4.40
1893.....	731	27	3.60
1894.....	783	25	3.19
1895.....	770	31	4.02
1896.....	772	24	3.10
1897.....	838	34	4.68
1898.....	841	31	3.65
1899.....	852	41	4.88
1900.....	881	34	3.85
1901.....	1,069	57	5.33
1902.....	1,441	138	9.70
1903.....	1,543	94	6.02
1904.....	1,428	79	5.58

TABLE P.—Showing the per capita cost since 1874.

Year.	Cost.	Year.	Cost.
1874.....	\$222.62	1893.....	\$184.98
1876.....	260.00	1894.....	168.95
1877.....	210.00	1895.....	167.06
1879.....	173.00	1896.....	172.50
1881.....	203.00	1897.....	146.86
1882.....	174.84	1898.....	140.83
1887.....	186.69	1899.....	137.92
1888.....	174.61	1900.....	141.67
1889.....	170.30	1901 <sup>a</sup> .....	109.35
1890.....	169.32	1902.....	144.50
1891.....	180.34	1903.....	140.37
1892.....	168.42	1904.....	142.61

<sup>a</sup> For ten months only, fiscal year being changed.

## EXHIBIT—EMMONS No. 5.

THE WYOMING STATE HOSPITAL FOR THE INSANE,  
*Evanston, Wyo., November 27, 1905.*

DEAR DOCTOR: In reply to your favor of recent date I have to reply that our daily per capita cost for the year ending September 30, 1905, was 51 cents. This includes all expenses, excluding repairs, improvements, insurance, and transportation of patients. The daily cost per capita was 45½ cents.

For the past ten years our death rate to the total number of patients under treatment was 6.7 per cent; for the same period, the recovery rate to the number of admissions was 38 per cent.

Very truly, yours,

C. H. SOLIER, M. D.,  
*Superintendent.*

Dr. C. M. EMMONS,  
*1100 Pennsylvania avenue SE., Washington, D. C.*

## EXHIBIT—EMMONS No. 6.

[Extract from report (biennial) of the Southern Indiana Hospital for the Insane, period ending October 31, 1904.]

*Population and per capita, 1902-1903.*

Average number patients daily .....	617. 29
Gross per capita .....	\$169. 39
Per capita, excluding repairs .....	\$162. 92
Per capita, excluding clothing .....	\$158. 79
Per capita for clothing .....	\$4. 11
Per capita for repairs .....	\$6. 4799
Per capita for food .....	\$63. 739
Per capita for fuel, laundry and other outside departments .....	\$32. 2662
Per capita for salaries and wages .....	\$62. 078
Per capita for food each day .....	\$0. 1746

*Population and per capita, 1903-1904.*

Average number patients daily .....	626. 977
Gross per capita .....	\$171. 149
Per capita, excluding repairs .....	\$164. 79
Per capita, excluding clothing .....	\$165. 077
Per capita for clothing .....	\$6. 07
Per capita for repairs .....	\$6. 357
Per capita for food .....	\$55. 317
Per capita for fuel, laundry and outside departments .....	\$43. 21
Per capita for salaries and wages .....	\$60. 188
Per capita for food each day .....	\$0. 1515

## EXHIBIT—EMMONS, No. 7.

SOUTHERN CALIFORNIA STATE HOSPITAL,  
*Patton, Cal., January 2, 1906.*

DEAR DOCTOR: The records of this institution for the year ending June 30, 1905, show the following statistics: Cost of maintenance per capita was \$0.4775; the rate of mortality on whole number treated was 6.75; the percentage of recoveries on number of admissions, 46.13.

Trusting that this is the information you desire, we are,

Respectfully, yours,

A. P. WILLIAMSON,  
*Medical Superintendent.*

CHAS. M. EMMONS, M. D.,  
*Washington, D. C.*

## EXHIBIT—EMMONS, No. 8.

NEW HAMPSHIRE STATE HOSPITAL,  
*Concord, N. H., November 23, 1905.*

DEAR DOCTOR: In reply to your inquiry of the 16th, I would say that the per capita cost is \$4 per week, including salaries of officers, repairs, and improvements. The per cent of recoveries, based on the number of different cases admitted and excluding all cases of alcoholic and drug habits, was 21.50 per cent. The rate of mortality was 9 per cent.

Yours, truly,

C. P. BANCROFT,  
*Superintendent.*

Dr. C. M. EMMONS,  
*1100 Pennsylvania Avenue SE., Washington, D. C.*

## EXHIBIT—EMMONS No. 9.

STATE OF NEW YORK,  
DANNEMORA STATE HOSPITAL,  
*Dannemora, January 1, 1906.*

DEAR DOCTOR: In reply to your inquiry of December 29, I beg to state that the per capita cost per patient of conducting this institution for the fiscal year ending September 30, 1905, was \$3.90, figured on the same basis as former years.

Heretofore officers' salaries have been paid from special appropriation and not included in the general maintenance. This has been changed, however, and figured on the new basis the per capita cost would be \$4.41.

This is a small institution with about 260 patients, and the per capita cost is necessarily rather high.

The death rate based on the whole number treated was 1.62 per cent. On the average daily population, 2.02 per cent.

The recovery rate based on the whole number treated was 5.54 per cent; based on the average daily population 6.89 per cent, and on the year's admissions 23.61 per cent.

Very truly, yours,

C. H. NORTH,  
*Medical Superintendent.*

Dr. C. M. EMMONS,  
*1100 Pennsylvania Avenue, SE., Washington, D. C.*

## EXHIBIT—EMMONS, No. 10.

[Extract from report (biennial) of the Wisconsin State Hospital for the Insane, period ending June 30, 1904.]

TABLE 1.—Movements of population in Wisconsin State Hospital for Insane during each year of biennial term ending June 30, 1904.

	1902-3.			1903-4.		
	Male.	Female.	Total.	Male.	Female.	Total.
Remaining in hospital at commencement of each year, to wit, July 1.	250	166	416	240	166	406
Returned from escapes effected, paroles granted, and transfers made before commencement of year.	17	8	25	32	20	52
Original admissions during each year.	241	155	396	229	161	390
Number in hospital during some time of each year.	508	329	837	501	347	848
Absent at close of each year, June 30, 1903, and June 30, 1904, on paroles granted during each year.	149	89	238	132	78	210
Transferred to other institutions and not returned during each year.	98	58	156	89	50	139
Eloped and not returned during each year.	4	0	4	5		5
Died.	17	16	33	28	22	50
Discharged as sane under sec. 587, R. S.	0	0	0	2		2
Number in hospital at some time during each year but absent at close of year.	268	163	431	256	150	406
Remaining in hospital at close of each year.	240	166	406	245	197	442
Daily average in hospital.	246	168	415	247	178	425
Number of paroled patients discharged during each year as sane by virtue of sec. 587c, R. S., as amended by chapter 327, laws of 1899, such patients having been continuously absent from the hospital during their respective paroles for two years.	85	62	147	64	50	114

## Statement of current expense fund, 1904.

1903.			
July 1	Balance .....		\$130,204.30
1904.			
Jan. 1	From counties .....		34,246.34
June 30	Steward for board and clothing patients .....		3,800.15
June 30	Steward for sundries .....		3,376.14
June 30	Paid on account of current expenses this year .....	\$108,978.14	
	Balance in State treasury .....	\$62,404.61	
	Balance in hands of steward .....	244.18	
		62,648.79	
Total .....		171,626.93	171,626.93

## EXHIBIT--EMMONS No. 11.

UTICA STATE HOSPITAL,  
Utica, N. Y., November 8, 1905.

DEAR DOCTOR: I am in receipt of your letter dated October 11. During our fiscal year, which ended September 30, 1905, the per capita cost was \$200.74. The recovery rate, based upon the number of admissions, was 23.67. On the average number under treatment, the recovery rate was 6.51. The death rate, based upon the average population, was 9.63.

I would be glad to send you the entire report, but it has not yet been printed.

Yours, very truly,

H. L. PALMER,  
Superintendent.

Dr. C. M. EMMONS,

1100 Pennsylvania Avenue, S.E., Washington, D. C.

## EXHIBIT—EMMONS No. 12.

[Extract from report (biennial) of the Illinois Asylum for Insane Criminals, period ending July 1, 1904.]

Number discharged .....	6
Escaped .....	1
Discharged and returned to prison .....	38
Transferred to Illinois Asylum for Feeble-minded Children .....	1
Transferred to Government Hospital for Insane, Washington, D. C. ....	1
Died .....	24
The percentage of recoveries on the whole number of patients in the two years ending July 1, 1904 .....	8.98
Average number of patients .....	173.98
Average cost per capita from July 1, 1902, to June 30, 1903 .....	198.24
Average cost per capita from July 1, 1903, to June 30, 1904 .....	206.68
Average cost per capita during the two years ending June 30, 1904 .....	202.46
Number remaining July 1, 1904 .....	181

## EXHIBIT—EMMONS No. 13.

[Extract from report (biennial) of the State Lunatic Asylum of Arkansas for period ending September 30, 1904.]

I urgently recommend in behalf of these unfortunate insane that the ratio of maintenance be increased to \$10 per month. Contrasting the different eleemosynary institutions of the State, the deaf mute and blind school, they have \$10 maintenance, with special appropriation for clothes, water, etc.; while we, with proverbially the most destructive element of humanity, have but \$8.33, out of which must be supplied food, clothing, bedding, water, etc.; while often in a single night the beds are riddled and clothes are torn into strips. I would respectfully recommend that you raise the maintenance per capita to \$10 a month, allowing special appropriation of \$4,000 for water and \$25,000 for fuel.

## EXHIBIT—EMMONS No. 14.

[Extract from report of the Athens State Hospital of Ohio for the year 1904.]

To the Hon. MYRON T. HERRICK, *Governor*.

DEAR SIR: We have the honor to present herewith our report as board of trustees, embracing the operations of the Athens State Hospital for the fiscal year ending November 15, 1904, this being the thirty-first annual report of the institution. The reports of the superintendent and steward are submitted with ours.

There has been during the year a daily average of 1,125 patients, actual residents of the hospital. There have been expended for the maintenance of patients for the past year \$107,524.55; based upon the actual number resident makes a per capita cost of \$95.57.

## EXHIBIT—EMMONS No. 15.

*Comparative expenditures Government Hospital for the Insane.*

	Salaries and wages.		Increase.	Rate of increase.
	1903. <sup>a</sup>	1905. <sup>b</sup>		
Superintendent, physicians, and general office .....	\$28,324.77	\$31,748.84	\$6,424.07	24
Ward service .....	95,223.79	100,994.46	5,760.67	6
Inside domestic department .....	32,578.66	37,446.86	4,868.20	15
Engineer's department .....	16,359.06	21,278.22	4,919.16	25
Farm, garden, drivers, etc. ....	30,117.16	46,529.08	16,411.92	50
Mechanics and helpers .....	29,656.26	43,591.39	13,935.13	46
Laundry .....	8,753.42	11,833.32	3,079.90	37
Sunday service .....	100.00	547.28	447.28	425
Total .....	241,093.12	296,969.45	55,866.33	.....

<sup>a</sup> Report for 1903, p. 23.<sup>b</sup> Report for 1905, p. 30.

Shows a net increase of about 23 per cent in total salaries.

*Total number of patients treated during year ending June 30—*

1903.....	3,050
1904.....	3,135
1905.....	3,159

*Total number of patients remaining in hospital year ending June 30—*

1903.....	2,369
1904.....	2,492
1905.....	2,551

Showing net increase in population of patients from June 30, 1903, to June 30, 1905, to be 192 patients, or about 8½ per cent.

In connection with the salaries of the physicians and general office, I understand from testimony since 1905 reports an increase as follows: Doctor O'Malley, \$1,500; Mr. Offutt, increase, \$300; Mr. Sanger, increase, \$600; Mrs. O'Brien (new position), matron, \$720; librarian.

#### EXHIBIT—EMMONS, No. 16.

[38 letters.]

##### No. 1.

SPRINGFIELD STATE HOSPITAL,  
*Sykesville, Md., January 15, 1906.*

DEAR DOCTOR: Replying to your favor of sometime ago, would say that the per capita cost last year was \$207. The mortality rate was 7.05 and recoveries 25 per cent.

Very respectfully,

J. C. CLARK,  
*Superintendent.*

Dr. CHARLES M. EMMONS, *Secretary,*  
*303 Seventh Street NW., Washington, D. C.*

##### No. 2.

HASTINGS STATE ASYLUM,  
*Hastings, Minn., November 13, 1905.*

DEAR SIR: Replying to your inquiry of November 9, would state that our per capita cost for year of 1903-4, was \$140.41; our mortality was 7 deaths out of an average number of 232 patients for the year. As to the recoveries, we can not give you, as our patients are a chronic insane and are transferred from the hospitals for the insane.

If you will request the State board of control, St. Paul, Minn., to send you their biennial report you will find the information given above as well as any other you may want pertaining to State institutions of this State.

Yours, respectfully,

WM. J. YANZ,  
*Superintendent.*

C. M. EMMONS, M. D.,  
*Washington, D. C.*

##### No. 3.

OSAWATOMIE STATE HOSPITAL,  
*Osawatomie, Kans., January 1, 1906.*

DEAR DOCTOR: I have yours of recent date, asking the per capita cost, rate of mortality, and per cent of recoveries of patients in this

hospital. Replying, will say that the last biennial report shows, in round numbers, the per capita cost to be \$152 per year. The rate of mortality about 10 per cent. The average number of recoveries, based on admissions, about 36 per cent.

Fraternally,

L. L. UHLS,  
*Superintendent.*

Dr. CHAS. M. EMMONS,  
*303 Seventh street NW., Washington, D. C.*

No. 4.

INDEPENDENCE STATE HOSPITAL,  
*Independence, Iowa, January 5, 1906.*

DEAR SIR: Answering yours of November 16, in regard to per capita, rate of mortality, and per cent of recoveries, our biennial report for the period ending June 30, 1905, shows the number of recoveries to average a little more than 16 per cent. This is based on the total number of admissions. The rate of mortality is 10.17 per cent, based on the total number treated during the two years. Our per capita amounts to about \$14 per month, of which \$12 is paid from the county, and it is calculated that the products of the farm average about \$2.

Yours, very sincerely,

W. P. CRUMBACKER,  
*Superintendent.*

CHAS. M. EMMONS, M. D.,  
*Washington, D. C.*

No. 5.

WESTERN WASHINGTON HOSPITAL FOR INSANE,  
*Fort Steilacoom, January 8, 1906.*

DEAR DOCTOR: Replying to your letter of the 29th ultimo, asking for information from our latest report, I would say that the following for the year ending September 30, 1904, was taken from our biennial report to the State board of control. The per capita cost is for the two years and the other information for the year ending September 30, 1904, to wit:

Per capita cost, biennial term ending September 30, 1904 .....	\$0. 3255
Number treated for year ending September 30, 1904 .....	1, 068
Admissions .....	324
Per cent of deaths on whole number treated .....	8. 70
Per cent of recoveries to admissions .....	25. 92

Trusting this information will meet your requirements, I am,  
Very truly, yours,

E. VAN ZANDT, *Superintendent.*

C. M. EMMONS, M. D.,  
*Secretary Medico-Legal Society,*  
*303 Seventh Street NW., Washington, D. C.*

No. 6.

TENNESSEE WESTERN HOSPITAL FOR INSANE,  
*Bolivar, Tenn., March 6, 1906.*

DEAR DOCTOR: In reply to yours of the 29th of December last, will say by our latest report the cost per capita cost per patient \$135;



rate of mortality, 91 $\frac{1}{4}$  per cent; recoveries, 28 $\frac{1}{4}$ . This is for the two years 1903 and 1904. Our report is only made biennially.

Hoping this is not too late—your letter was misplaced is why it was not answered before this.

Respectfully,

J. J. NEELY,  
Per A. C. M.

Dr. CHARLES M. EMMONS,  
*Secretary Medico-Legal Society, Washington, D. C.*

No. 7.

MOUNT PLEASANT STATE HOSPITAL,  
*Mount Pleasant, Iowa, January 4, 1906.*

DEAR DOCTOR: Your recent letter received, and in reply will say that from the latest report of this institution the greater per cent of mortality has been 6.1 per cent, figured on the total number of cases under treatment during the two years ending July 1, 1905. The recoveries, based on the admissions, were 18 per cent. Under the law of the State the institutions are allowed only \$12 per month per patient in the hospital. This is the oldest institution in the State, and our wards are filled with a large number of very long resident patients.

Yours, fraternally,

C. F. APPLEGATE,  
*Superintendent.*

CHAS. M. EMMONS, M. D.,  
*303 Seventh Street NW., Washington, D. C.*

No. 8.

GEORGIA STATE SANITARIUM,  
*Milledgeville, Ga., November 14, 1905.*

DEAR DOCTOR: Your letter to hand, and in reply would say that the per capita cost for the year ending December 31, 1904, was 33 $\frac{1}{4}$  cents per diem, the rate of mortality 10 $\frac{1}{4}$  per cent, and the percentage of recoveries 40 $\frac{1}{4}$ .

Very truly, yours, etc.,

H. S. JAMES, *Secretary.*

C. M. EMMONS, M. D.,  
*Washington, D. C.*

No. 9.

EASTERN STATE HOSPITAL,  
*Williamsburg, Va., January 9, 1906.*

DEAR DOCTOR: In reply to yours of November 16, which did not reach me until December 30, I herewith inclose our last annual report, which will give you all the information requested. You will find on page 11 that our per capita is \$129.18. You will find the other data on page 15 and in other tables of this report.

Yours, very truly,

L. S. FOSTER, *Superintendent.*

Dr. CHAS. M. EMMONS,  
*303 Seventh Street NW., Washington, D. C.*

## No. 10.

STATE HOSPITAL FOR THE INSANE OF NORTH DAKOTA,  
*Jamestown, N. Dak., November 14, 1905.*

DEAR DOCTOR: In reply to your favor of the 9th instant, would say that the per capita cost per patient is \$170.38 per year, \$14.20 a month, or 47 cents a day. The average per cent of recoveries is 27.08, of mortalities 10.7. This per cent is of all cases treated—the chronic cases as well as the others.

Yours, truly,

DWIGHT S. MOORE,  
*Superintendent.*

Dr. C. M. EMMONS,  
*1100 Pennsylvania Avenue, S.E., Washington, D. C.*

## No. 11.

CONNECTICUT HOSPITAL FOR THE INSANE,  
*Middletown, November 24, 1906.*

DEAR SIR: Replying to your letter of the 16th instant, I will say that the per capita cost of support at this hospital for the fiscal year ending September 30, 1905, was \$3.35 per week, including clothing.

Statistics for the year ending September 30, 1905, show—

Number at the beginning of the year.....	2,412
Persons admitted during the year.....	466

Total present in the year.....	2,878
--------------------------------	-------

Recovered .....	80
Improved .....	79
Stationary .....	104
Died .....	178

Discharged .....	441
------------------	-----

Number remaining at the end of the year .....	2,437
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The percentage of recoveries reckoned on the admissions is 17 per cent. The percentage of deaths reckoned on the same basis is 38 per cent.

I remain, very truly, yours,

HENRY S. NOBLE,  
*Superintendent.*

C. M. EMMONS, M. D., *Secretary.*

## No. 12.

STOCKTON STATE HOSPITAL,  
*Stockton, Cal., January 6, 1906.*

DEAR DOCTOR: In reply to your letter of inquiry of recent date will say that the report for the year ending June 30, 1905, gives the per capita cost per patient as 34.7; the percentage of deaths to the whole number treated was 7.80; the average per cent of recoveries 29.28.

Yours truly,

ASA CLARK, *Medical Superintendent.*  
 Per T.

Dr. CHAS. M. EMMONS,  
*Secretary Medico-Legal Society, Washington, D. C.*

## No. 13.

SOUTH DAKOTA STATE HOSPITAL,  
*Yankton, S. Dak., November 23, 1905.*

DEAR DOCTOR: I am in receipt of your inquiry of November 11, asking for statistics of this institution in regard to percentages, cost per patient, mortality rate, recovery rate, etc.

Replying to the same, will say that in this State an allowance of \$16 per month per capita for maintenance is established by our law. The mortality rate based on the total number treated from 1890 to the present time is as follows:

Period.	Recoveries, based on admissions.	Deaths, based on total num- ber treated.
	<i>Per cent.</i>	<i>Per cent.</i>
1890 .....	49	6.5
1892 .....	41.1	10
1894 .....	49	3.6
1895 .....	85	4.2
1896 .....	23	6
1898 .....	28.3	6.6
1900 .....	40	7
1902 .....	28.1	5.5
1904 .....	38	6

These statistics, I am aware, are somewhat unusual, but are readily explained by the following facts: The State of South Dakota was practically settled in a single decade—from 1880 to 1890. The population it received at that time was young and exceptionally vigorous and healthful. The climate is likewise exceptionally invigorating and healthful and agriculture almost the sole pursuit of the people. As a consequence of these conditions senile and degenerative cases were extremely rare, especially in the earlier years, and an exceptionally large percentage of those committed to the State hospital were suffering from the acute psychoses. Under these circumstances a high recovery rate and a low death rate were almost inevitable. These conditions are gradually changing. The ratio of the insane to the sane population is slowly increasing. Degenerative forms of mental alienation are more frequent and acute conditions relatively less frequent.

Trusting that the above information will be found satisfactory, I am,

Very truly, yours,

L. C. MEAD, *Superintendent.*

C. M. EMMONS, M. D.,

303 Seventh Street NW., Washington, D. C.

## No. 14.

EASTERN KENTUCKY ASYLUM FOR THE INSANE,  
*Lexington, Ky., November 15, 1905.*

DEAR DOCTOR: Find inclosed tables as requested. The per capita cost per patient is \$150 per year.

Yours, very truly,

J. S. REDWINE,  
*Superintendent.*

Dr. C. M. EMMONS,

1100 Pennsylvania Avenue SE., Washington, D. C.

No. 15.

MEDFIELD INSANE ASYLUM,  
*Harding, Mass., January 1, 1906.*

DEAR SIR: In reply to your favor of December 27, the per capita cost of patients for the past year was \$3.08 per week. This included everything but new buildings. Mortality was a trifle over 4 per cent, reckoned on the whole number of cases under treatment. As we receive only the chronic pauper insane from the other hospitals for the insane in this State, there is little opportunity for recoveries. We average about three a year.

Very truly, yours,

EDWD. FRENCH.  
B.

Mr. CHAS. M. EMMONS,  
*303 Seventh Street NW., Washington, D. C.*

No. 16.

EASTERN INDIANA HOSPITAL FOR THE INSANE,  
*Richmond, Ind., December 30, 1905.*

DEAR DOCTOR: Answering your letter of the 12th instant:

1. The daily average number of patients enrolled in this hospital for the fiscal year ending October 31, 1905, was 732.

2. The per capita cost of all expenditures of whatever kind for the same year was \$177.53.

3. The mortality rate was 5.4 per cent of the whole number (867) under treatment.

4. Discharged as recovered, 24.1 per cent of the number admitted.

5. Discharged as much improved, 28.2 per cent of the number admitted.

It is proper to say that this hospital receives cases representing all forms of insanity, including those of epileptic dementia, and that our recovered list is very carefully and conservatively made up. Many whom we have discharged as improved would ordinarily be discharged as recovered, but it is my purpose to very carefully protect the recovered list. I send you under separate cover a copy of my last biennial report and I will be pleased to have you carefully examine the statistical tables therein contained.

Yours, respectfully,

S. E. SMITH,  
*Medical Superintendent.*

Dr. CHAS. M. EMMONS,  
*Washington, D. C.*

No. 17.

NORTHERN INDIANA HOSPITAL FOR INSANE,  
*Logansport, Ind., January 1, 1905.*

DEAR SIR: Answering your query of December 29, the per capita cost per patient per annum has recently been \$163. The mortality rate on the number admitted averages about  $6\frac{1}{4}$  per cent. Apparent recoveries on total number treated, 35 per cent.

Respectfully, yours,

J. G. ROGERS,  
*Medical Superintendent.*

Dr. CHAS. M. EMMONS,  
*303 Seventh Street NW., Washington, D. C.*

## No. 18.

STATE OF NEW YORK,  
MIDDLETOWN STATE HOMEOPATHIC HOSPITAL,  
*Middletown, January 3, 1906.*

DEAR DOCTOR: The information called for in your letter of December 12 is inclosed herewith.

Very truly, yours,

M. C. ASHLEY,  
*Superintendent.*

C. M. EMMONS, M. D.,  
*303 Seventh Street NW., Washington, D. C.*

Inclosure:

MIDDLETOWN STATE HOMEOPATHIC HOSPITAL, MIDDLETOWN, N. Y.

*For the year ending September 30, 1905.*

Weekly per capita cost on daily average, per patient.....	\$3.64
Percentage of recoveries:	
On whole number admitted .....	36.18
On whole number discharged .....	33.46
On whole number treated .....	5.52
On daily average population.....	6.60
Percentage of deaths:	
On whole number admitted .....	34.04
On whole number discharged .....	31.49
On whole number treated .....	5.19
On daily average population.....	6.22
Daily average population.....	1,287
Whole number treated.....	1,540
Whole number admitted.....	235
Whole number discharged .....	254

## No. 19.

STATE OF NEW YORK, ROCHESTER STATE HOSPITAL,  
*December 30, 1905.*

DEAR DOCTOR: The per capita cost of the year ending September 30, 1905, was \$202.73<sup>15</sup>/<sub>100</sub>. The mortality was 5.91. The per cent of recoveries was 5.70 on the population, and 20.35 on the number of patients received during the year.

Very truly, yours,

E. H. HOWARD,  
*Superintendent.*

Dr. C. M. EMMONS,  
*Medico-Legal Society, District of Columbia,  
Washington, D. C.*

## No. 20.

STATE OF NEW YORK,  
HUDSON RIVER STATE HOSPITAL,  
*Poughkeepsie, N. Y., January 2, 1906.*

DEAR DOCTOR: In reply to your letter of the 29th ultimo, I wish to say that for the fiscal year ended September 30, 1905, our maintenance per capita cost per week was \$3.69. The deaths during the year, based on the total number under treatment, amounted to 8.32 per cent. The rate of recoveries, based on original admissions, was 15.78 per cent,

and 74.6 per cent when based upon the number of "probably recoverable" cases admitted.

Hoping that this is the information you desire, I am,  
Very truly, yours,

CHAS. W. PILGRIM.

Dr. C. M. EMMONS,  
*Secretary Medico-Legal Society, District of Columbia,  
303 Seventh Street NW., Washington, D. C.*

No. 21.

STATE OF NEW YORK, BUFFALO STATE HOSPITAL,  
*Buffalo, N. Y., November 7, 1905.*

DEAR DOCTOR: I am in receipt of your letter of the 11th ultimo, and in reply to the questions contained therein, I would say that for the year ending September 30, 1905—

The weekly per capita cost per patient was.....	\$3.725
The rate of recoveries and of mortality was as follows:	
Percentage of recoveries to number of new admissions.....	23.40
Percentage of recoveries to average population.....	5.30
Percentage of recoveries to number discharged.....	25.07
Percentage of recoveries to number discharged, exclusive of deaths, inebriates, and transferred.....	47.54
Percentage of recoveries to total number of admissions.....	22.66
Percentage of deaths to daily average population.....	.06

Hoping the above information is what you desire, I am

Yours, very truly,

A. W. HURD.

Dr. C. M. EMMONS,  
*1100 Pennsylvania Avenue, SE., Washington, D. C.*

No. 22.

STATE OF NEW YORK,  
KINGS PARK STATE HOSPITAL,  
*Kings Park, Long Island, N. Y., January 2, 1906.*

DEAR SIR: In reply to your circular letter of recent date I would say the per capita cost per patient at this hospital for the year just past was \$187.09. The recovery rate was 34.6 per cent, while the rate of mortality of the total number under treatment was 7 per cent.

Yours, very truly,

WM. AUSTIN MACY, *Superintendent.*

Dr. CHARLES W. EMMONS,  
*303 Seventh Street NW., Washington, D. C.*

No. 23.

STATE OF NEW YORK,  
GOWANDA STATE HOMEOPATHIC HOSPITAL,  
*Gowanda, N. Y., January 2, 1906.*

DEAR DOCTOR: Replying to your letter of the 29th instant, I would say that the cost per patient per year at this hospital is \$195.311. The average percentage of recoveries on the number admitted is 33.06; on

the number discharged, including deaths, 35.96. The percentage on deaths on the number treated is 4.77.

Yours, very truly,

D. H. ARTHUR,  
*Superintendent.*

Dr. C. M. EMMONS,  
*Washington, D. C.*

No. 24.

STATE OF NEW YORK, MATTEAWAN STATE HOSPITAL,  
*Fishkill on the Hudson, January 1, 1906.*

DEAR DOCTOR: Replying to your letter of the 12th, I beg to say that the per capita cost for patients at this institution last year was \$181.05; the mortality rate, 2.92 per cent; the recovery rate, 14 per cent, based on the number of admissions.

Yours, truly,

R. B. LAMB,  
*Medical Superintendent.*

CHARLES M. EMMONS, M. D.,  
*Secretary Medico-Legal Society,  
303 Seventh Street, NW., Washington, D. C.*

No. 25.

STATE OF NEW YORK, WILLARD STATE HOSPITAL,  
*Willard, Seneca County, November 8, 1905.*

DEAR DOCTOR: In reply to your inquiry of the 11th ultimo I would state as follows: Yearly per capita cost per patient, \$182.199; weekly per capita cost per patient, \$3.494; rate of mortality, 7.5 per cent; average per cent of recoveries, 32.4 per cent.

Very truly, yours,

R. M. ELLIOTT,  
*Superintendent.*

C. M. EMMONS, M. D.,  
*Secretary, etc., Medico-Legal Society,  
District of Columbia, Washington, D. C.*

No. 26.

State of New York,  
ST. LAWRENCE STATE HOSPITAL,  
*Ogdensburg, December 29, 1905.*

DEAR DOCTOR: In reply to your letter of the 12th instant, I beg to submit the following information:

Total admissions for year ending September 30, 1905.....	280
Average daily population .....	1, 717. 44
Per capita cost per patient .....	\$184. 319
Percentage of recoveries based on total admissions.....	0. 293
Percentage of recoveries based on average daily population.....	0. 049
Percentage of deaths based of average daily population .....	0. 069

Very truly, yours,

R. H. HUTCHINGS, *Superintendent.*

Dr. C. M. EMMONS,  
*1100 Pennsylvania Avenue SE., Washington, D. C.*

No. 27.

LONGVIEW HOSPITAL,  
*Cincinnati, Ohio, January 5, 1906.*

DEAR SIR: In reply to your inquiry of December 29, 1905: Per capita cost per patient, \$167.45; rate of mortality, 8 per cent on whole number under treatment, viz, 1,340; average per cent of recoveries, 27, on total number admitted during year, viz, 279.

Very respectfully,

F. W. HARMON, *Superintendent.*

Dr. C. M. EMMONS,  
*Secretary Medico-Legal Society, District of Columbia.*

No. 28.

THE CLEVELAND STATE HOSPITAL,  
*Cleveland, Ohio, December 11, 1905.*

DEAR SIR: Replying to your communication of recent date, will say that our per capita cost for the year ending November 15, 1905, based on the net current expenses, was \$130.80, the rate of mortality 5.33 per cent, and the rate of recoveries 33 per cent.

Trusting this is the information you desire, I beg to remain,

Very respectfully, yours,

A. B. HOWARD, *Superintendent.*

Dr. C. M. EMMONS,  
*Secretary Medico-Legal Society, Washington, D. C.*

No. 29.

DAYTON STATE HOSPITAL,  
*Dayton, Ohio, November 23, 1905.*

DEAR SIR: Replying to your inquiry of recent date, I wish to say that the per capita cost in this institution is \$127, the mortality rate 6 per cent, the recovery rate 30 per cent.

Very respectfully,

A. F. SHEPHERD,  
*Superintendent.*

C. M. EMMONS,  
*1100 Pennsylvania Avenue S. E., Washington, D. C.*

No. 30.

THE MASSILLON STATE HOSPITAL,  
*Massillon, Ohio, January 2, 1906.*

DEAR DOCTOR: Replying to yours of the 29th ultimo, would say that our last report is not yet published. The per capita cost, however, including officers' salaries, was \$114.50, the mortality rate 10 per cent, and the recovery rate 33.66 per cent.

Hoping these answers will be satisfactory, I am,

Very sincerely, yours,

HENRY C. EYMAN, *Superintendent.*

Dr. CHAS. M. EMMONS,  
*303 Seventh Street N W., Washington, D. C.*



## No. 31.

STATE OF NEW YORK, MANHATTAN STATE HOSPITAL,  
*Wards Island, New York City, December 29, 1905.*

DEAR DOCTOR: Replying to your recent inquiry, I inclose herewith the information you request regarding the above hospital, as it will appear in my annual report for the year ending September 30, 1905.

Yours, very truly,

E. C. DENT, *Superintendent.*

Dr. C. M. EMMONS, *Secretary,*  
*303 Seventh Street NW., Washington, D. C.*

STATE OF NEW YORK, MANHATTAN STATE HOSPITAL.

*For year ending September 30, 1905.*

## Recoveries:

On number admitted .....	20.27
On number admitted, excluding all transfers .....	21.96
On average daily population .....	7.29
On whole number treated .....	5.55
On number discharged .....	32.38

## Improved:

On number admitted .....	30.66
On number admitted, excluding all transfers .....	33.22
On average daily population .....	11.02
On whole number treated .....	8.29
On number discharged .....	48.99

Total number of deaths, 356, representing 6.21 per cent of the whole number treated.

Average per capita cost per patient for year ending September 30, 1905, \$167.7137, against a per capita cost for the last fiscal year of \$170.7603. During the year an increase in employees' wages amounting to \$4.83 per patient has been made, so the net comparison shows a saving of \$7.37 per capita over last year.

## No. 32.

STATE HOSPITAL,  
*Goldsboro, N. C., December 28, 1905.*

MY DEAR DOCTOR: Replying to your letter just received, I will state that the per capita cost of this hospital for the year just closed is \$112.46; the rate of mortality is 7.11, and the average per cent of recoveries is 49.15.

Very respectfully,

J. F. MILLER,  
*Superintendent.*

Dr. CHAS. M. EMMONS, *Secretary.*

## No. 33.

STATE HOSPITAL,  
*Warren, Pa., December 29, 1905.*

DEAR DOCTOR: Under separate cover we send you our annual report for 1904. The 1905 report is about ready to go in the printers' hands, and as soon as we get it I will forward you a copy. You will see on pages 47 and 48 the answers to your questions. The State of Pennsylvania appropriates \$2 per week for the care of the indigent insane and the law allows us to collect \$1.75 per week from the counties and

townships. We always have a limited number of private patients, which, as you will note, brings up our per capita to \$3.80.

Yours, truly,

MORRIS S. GUTH, M. D., *Superintendent.*

CHARLES M. EMMONS, M. D.

EXHIBIT—EMMONS, No. 17.

WASHINGTON ASYLUM HOSPITAL—REGULAR DIET.

MONDAY.

*Breakfast.*—Hash, oatmeal, bread, butter, coffee.

*Dinner.*—Meat, soup, hominy, bread.

*Supper.*—Mush, sirup, bread, butter, tea.

TUESDAY.

*Breakfast.*—Hash, oatmeal, bread, butter, coffee.

*Dinner.*—Beef stew, rice, bread, butter.

*Supper.*—Stewed fruit, bread, butter, tea.

WEDNESDAY.

*Breakfast.*—Hash, oatmeal, bread, butter, coffee.

*Dinner.*—Corned beef, baked beans, bread, butter.

*Supper.*—Stewed fruit, bread, butter, tea.

THURSDAY.

*Breakfast.*—Hash, oatmeal, bread, butter, coffee.

*Dinner.*—Meat, soup, hominy, bread.

*Supper.*—Stewed fruit, bread, butter, tea.

FRIDAY.

*Breakfast.*—Hash, oatmeal, bread, butter, coffee.

*Dinner.*—Hot roast, brown gravy, rice, bread.

*Supper.*—Stewed fruit, bread, butter, tea.

SATURDAY.

*Breakfast.*—Hash, oatmeal, bread, butter, coffee.

*Dinner.*—Beef stew with potatoes, rice, bread.

*Supper.*—Cheese, bread, butter, tea.

SUNDAY.

*Breakfast.*—Hash, oatmeal, bread, butter, coffee.

*Dinner.*—Mutton stew, mashed potatoes, boiled onions, bread.

*Supper.*—Stewed fruit, bread, butter, tea.

## HOSPITAL DIET (TENTS).

## BREAKFAST, 8 A. M.

1. Cold ham, tongue or sausage, plenty of bread and butter, 1 pint of hot milk.
2. Oat or wheat porridge, ham or bacon and eggs or poached eggs on toast, bread and butter, 1 pint of hot milk.

## DINNER, 1 P. M.

Fish, potatoes and peas, beans or rice, meat, potatoes, and cabbage or cauliflower, gravy or butter sauce, milk and egg pudding, pastry or fruit, 1 pint of milk, hot or cold.

## SUPPER, 7 P. M.

1. Hot meat, potatoes, and vegetables, cold meat, bread and butter, cheese, 1 pint of milk.
  2. Boiled eggs, potatoes and onions fried in fat, cheese, 1 pint of milk.
- N. B.—Patients should eat nothing between meals, but should have plenty of butter and fat served with each meal.

## EXHIBIT—EMMONS, No. 18.

[Extract from report of the Northampton Insane Hospital for the year ending September 30, 1905.]

During the year the average number of patients has been 794+. Dividing the total expenditures for maintenance (\$148,185.01) by the average number gives an average annual cost of \$186.63+, equivalent to an average weekly cost of \$3.57+.

## DIETARY OF THE NORTHAMPTON INSANE HOSPITAL.

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[There are two bills of fare, the first of which is supplied to the tables of about 800 persons, and the second to those of somewhat over 800. In addition to these about 190 quarts of egg and milk are taken through the wards between meals and at bedtime and distributed to the old, the feeble, and the convalescent classes.]

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## BILL OF FARE NO. 1.

*Breakfast.*

- Monday: Tea, oatmeal, coffee, broiled beefsteak or eggs, potatoes, warm rolls ("biscuit"), bread and butter.
- Tuesday: Tea, coffee, oatmeal, fried tripe,<sup>a</sup> potatoes, warm rolls, bread and butter.
- Wednesday: Tea, coffee, oatmeal, broiled beefsteak or eggs, potatoes, and warm brown (rye and Indian) bread.
- Thursday: Tea, coffee, oatmeal, broiled beefsteak, potatoes, warm rolls, bread and butter.
- Friday: Tea, coffee, oatmeal, fried tripe,<sup>a</sup> potatoes, warm rolls, bread and butter.
- Saturday: Tea, coffee, oatmeal, either fried fish-balls or liver, meat hash, hot corn cake, bread and butter.
- Sunday: Tea, coffee, oatmeal, eggs, potatoes, warm rolls, bread and butter, and fried Indian corn pudding.

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<sup>a</sup> Tripe is replaced in winter by sausages, and in spring by fried ham and eggs, except in the season of shad, when that fish is given once each week instead of ham and eggs, and once instead of beefsteak.

*Dinner.*

Monday: Roast beef, potatoes, and one other vegetable,<sup>a</sup> bread and butter, boiled rice with sirup or sugar.

Tuesday: Vegetable soup, roast or stewed veal,<sup>b</sup> potatoes and one other vegetable,<sup>c</sup> bread and butter, and baked Indian pudding.

Wednesday: Either roasted or boiled mutton, potatoes and one other vegetable,<sup>c</sup> bread and butter, and berry or apple pudding with sauce.<sup>c</sup>

Thursday: Vegetable soup, corned beef, potatoes and one other vegetable,<sup>a</sup> bread and butter, and boiled suet pudding with sirup.

Friday: Either fried or baked fresh fish,<sup>d</sup> or stewed or roasted veal, potatoes and one other vegetable,<sup>a</sup> bread and butter, and tapioca pudding or raisin pudding of either rice, bread, or cracker.

Saturday: Baked beans, corned beef, potatoes and one other vegetable,<sup>a</sup> pickles, bread and butter, and baked bread pudding.

Sunday: Stewed mutton, sweet potatoes, warmed baked beans, pickles, bread and butter, and pies, the kind varying with the season.

*Supper.*

Monday: Tea and bread, warm corn cake and butter, hard gingerbread, and a relish.<sup>e</sup>

Tuesday: Tea, white bread, graham bread and butter, soft gingerbread, and a relish in the warm season, substituted by buckwheat cakes in the cold season.

Wednesday: Tea, bread and butter, pie (the kind varying with the season) and ginger snaps, and a relish.

Thursday: Tea, bread and butter, cookies, and cheese.

Friday: Tea, bread and butter, cake (the kind varying), and a relish.

Saturday: Tea, bread and butter, doughnuts, and cheese.

Sunday: Tea, bread and butter, cookies and ginger snaps, and blancmange or corn starch.

Extra: In the winter and spring months hulled corn at supper, once in two weeks, on Saturdays.

## BILL OF FARE NO. 2.

*Breakfast.*

Monday: Coffee, oatmeal, boiled eggs, potatoes, and bread and butter.

Tuesday: Coffee, oatmeal, cold roast beef, potatoes, and bread and butter.

Wednesday: Coffee, oatmeal, meat stew or boiled eggs, potatoes, and warm rye and Indian corn brown bread and butter.

Thursday: Coffee, oatmeal, pickled codfish cooked in milk, potatoes, and bread and butter.

Friday: Coffee, oatmeal, cold corned beef or meat stew, potatoes, and bread and butter.

Saturday: Coffee, oatmeal, hash, either of meat or fish, and bread and butter.

Sunday: Coffee, oatmeal, boiled eggs, potatoes, and bread and butter.

*Dinner.*

Monday: Roast beef, potatoes and one other vegetable,<sup>a</sup> boiled hominy with molasses and bread.

Tuesday: Vegetable soup, potatoes, and one other vegetable,<sup>a</sup> baked Indian pudding,<sup>f</sup> and bread.

<sup>a</sup> At least three vegetables during the summer.

<sup>b</sup> Substituted in winter by fresh pork ribs, roasted.

<sup>c</sup> In spring, maple sirup is used as sauce for puddings.

<sup>d</sup> Substituted by stewed oysters in winter and spring, with some kind of roasted meat for those who prefer it.

<sup>e</sup> This term, used for the want of a better, includes dried beef, berries, baked apples, apple sauce, and canned fruits, all of which are supplied, and each according to the season.

<sup>f</sup> All baked puddings for the whole household are made with milk.

Wednesday: Boiled codfish with drawn-butter sauce, potatoes, and one other vegetable,<sup>a</sup> boiled hasty pudding, with molasses and bread.

Thursday: Vegetable soup, potatoes, cabbage or some other vegetable,<sup>a</sup> boiled rice with molasses,<sup>b</sup> and bread.

Friday: Boiled fresh fish with drawn-butter sauce, potatoes, beets, or some other vegetable,<sup>a</sup> boiled hasty pudding, with molasses and bread.

Saturday: Hot baked beans, potatoes, baked Indian or bread pudding, pickles and bread.

Sunday: Cold corned beef, potatoes, pies (the kind varying with the season), and bread.

#### *Supper.*

Monday: Tea, bread and butter, and hard gingerbread.

Tuesday: Tea, bread and butter, and soft gingerbread.

Wednesday: Tea, bread and butter, cake or ginger snaps, and some kind of relish.

Thursday: Tea, bread and butter, and cookies.

Friday: Tea, bread and butter, and soft gingerbread.

Saturday: Tea, bread and butter, cake or ginger snaps, sauce.

Sunday: Tea, bread and butter, and cookies.

#### *Extras.*

In the winter and spring months, hulled corn at supper on Saturdays.

In August and September these tables are furnished at supper with either berries, tomatoes, or baked apples as many as five times a week.

In eight halls, sauce of either fresh or dried apples is furnished four times a week for the rest of the year.

#### *Extras for the whole household.*

All persons have roasted turkey at dinner on Thanksgiving Day and on Christmas, with vegetables, celery, cranberry sauce, pudding, pie, and cider.

From four to five bushels of green sweet corn in the ear is consumed in its season, daily, with the exception of Sunday.

Strawberries, tomatoes, cucumbers, and melons are furnished in liberal quantities in their season.

In the spring, cowslips and dandelions are largely used as greens, and horse-radish as a condiment.

During eight months of the year apples are distributed daily among the patients.

Beef tea, chicken broth, mutton broth, scalded milk, arrowroot gruel, oatmeal gruel, milk punch, cracked wheat, oatmeal porridge, dry toast, milk toast, toast with dropped egg and boiled eggs for invalids and all who are not able to take the regular fare.

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<sup>a</sup> At least three vegetables in the summer.

<sup>b</sup> Maple sirup is furnished in the place of molasses three or four times in the spring.

## EXHIBIT.

## UNITED STATES REVISED STATUTES.

TITLE LXXV.—*Hospitals, asylums, and cemeteries.*CHAPTER ONE.—*The Government Hospital for the Insane.*

Sec.	Sec.
8409. Establishment and objects.	8427. Application by visitor.
8410. Salary and duties of Superintendent.	8428. Conveyance to hospital.
8411. Report of receipts and expenditures.	8429. Admission of insane persons having property.
8412. Board of visitors.	8430. Admission of indigent non-residents of District.
8413. President of board of visitors.	8431. Return of indigent insane to residence.
8414. Powers and duties of the board of visitors.	8432. Private patients.
8415. Who entitled to admission.	8433. Admission of pay patients.
8416. Inmates of the Soldiers' Home.	8434. Discharge of patients upon bond.
8417. Removal and care of insane inmates of National Home for Disabled Volunteer Soldiers.	8435. Jury in proceedings for admission of insane.
8418. Transfer of insane convicts.	8436. Arrest of insane persons in the District of Columbia.
8419. Insane persons accused of crime.	8437. Arrest, etc., of indigent and insane persons.
8420. Insane prisoners may be transferred to State asylums.	8438. Temporary detention at Government Hospital for Insane.
8421. Convicts restored to sanity to be returned to prison.	8439. Temporary commitment in other hospitals, etc.
8422. Delivery of insane criminals restored to sanity.	8440. Validity of certificates.
8423. Insane persons not to be confined to jail.	8441. False affidavits and certificates; penalty.
8424. Indigent insane of the District of Columbia.	8442. Disbursements of appropriations.
8425. Order of admission.	8443. Proceeds of sale of waste material.
8426. Certificate of judge.	8444. Private funds of patients.

Establishment and objects.

R. S., s. 4838.

7 A. G. Op., 460;  
28 A. G. Op., 287.

Salary and duties of superintendent.

R. S., s. 4839.  
3 Mar., 1881, 21  
Stat. L., 427, c.  
182; 1 Supp., 321.

SEC. 8409. There shall be in the District of Columbia a Government Hospital for the Insane, and its objects shall be the most humane care and enlightened curative treatment of the insane of the Army and Navy of the United States and of the District of Columbia.

SEC. 8410. The chief executive officer of the Hospital for the Insane shall be a superintendent, who shall be appointed by the Secretary of the Interior, and shall be entitled to a salary of four thousand dollars a year. He shall give bond for the faithful performance of his duties, in such sum and with such securities as may be required by the Secretary of the Interior. The superintendent shall be a well-educated physician, possessing competent experience in the care and treatment of the insane; he shall reside on the premises, and devote his whole time to the welfare of the institution; he shall, subject to the approval of the visitors, engage and discharge all needful and useful employees in the care of the insane, and all

laborers on the farm, and determine their wages and duties; he shall be the responsible disbursing agent of the institution, and shall be ex-officio secretary of the board of visitors.

SEC. 8411. The superintendent shall make a report to Congress annually at the beginning of each regular session, which shall show in detail the receipts and expenditures for all purposes connected with the hospital for the fiscal year preceding such session.

Report of receipts and expenditures.

4 June, 1880, 21 Stat. L., 156, c. 121; 1 Supp., 290.

SEC. 8412. Nine citizens of the District of Columbia, to be appointed by the President, shall constitute a board of visitors of the Hospital for the Insane. The term of office of three visitors shall expire bi-ennially on the thirtieth day of June in every odd-numbered year. Should any vacancy occur by death, resignation, or otherwise, it shall be filled by appointment for the unexpired term of such visitor. The office of visitor shall be honorary and without compensation.

Board of visitors.

R. S., s. 4840.

SEC. 8413. The board of visitors shall select from their number a president, to preside at their meetings for one year, or until a successor is elected.

President of board of visitors.

R. S., s. 4841.

SEC. 8414. The board of visitors, subject to the approval of the Secretary of the Interior, may make any needful by-laws for the government of themselves, and of the superintendent and his employes, and of the patients, not inconsistent with law; they shall visit the hospital at stated periods, and exercise so careful a supervision over its expenditures and general operations that the Government and community may have confidence in the correctness of its management; they shall make annually to the Secretary of the Interior a report for the preceding fiscal year setting forth the condition and wants of the institution.

Powers and duties of the board of visitors.

R. S., s. 4842.  
3 Mar., 1881, 21 Stat. L., 460, c. 184; 1 Supp., 321.

SEC. 8415. The superintendent, upon the order of the Secretary of War, of the Secretary of the Navy, and of the Secretary of the Treasury, respectively, shall receive, and keep in custody until they are cured, or removed by the same authority which ordered their reception, insane persons of the following descriptions:

Who entitled to admission.

R. S., s. 4848.  
3 Mar., 1875, 18 Stat. L., 486, c. 156, s. 5; 1 Supp., 94.

First. Insane persons belonging to the Army, Navy, Marine Corps, Revenue-Cutter Service, and Public Health and Marine Hospital Service.

16 June, 1880, 21 Stat. L., 275, c. 285; 1 Supp., 298.  
9 Feb. 1900, 31 Stat. L., 7, c. 13; 2 Supp., 1116.

Second. Civilians employed in the Quartermasters, Pay, and Subsistence Departments of the Army who may be, or may become insane, while in such employment.

14 A. G. Op., 225; 21 A. G. Op., 340.

Third. Men, who, while in the service of the United States, in the Army, Navy, or Marine Corps, have been admitted to the hospital, and have been thereafter discharged from it on the supposition that they have recovered their reason, and have, within three years after such discharge, become again insane from causes existing at the time of such discharge, and have no adequate means of support.

Fourth. Indigent insane persons who have been in either of the said services and been discharged therefrom on account of disability arising from such insanity.

Fifth. Indigent insane persons who have become insane within three years after their discharge from such service, from causes which arose during and were produced by said service.

Inmates of the  
Soldiers' Home.

7 July 1884, 32  
Stat. L., 213, c.  
332; 1 Supp., 469.

SEC. 8416. Any inmate of the Soldiers' Home who is now or may become insane shall, upon an order of the President of the Board of Commissioners of the Soldiers' Home, be admitted to said hospital, and treated therein; and the expenses of maintaining any such person shall be paid from the Soldiers' Home fund.

Removal and  
care of insane in-  
mates of Na-  
tional Home for  
Disabled Volun-  
teer Soldiers.

7 Aug., 1882, 22  
Stat. L., 330, c.  
433; 1 Supp., 381.  
8 Mar., 1901, 31  
Stat. L., 1163, c.  
563; 2 Supp., 1552.

SEC. 8417. Any inmate of the National Home for Disabled Volunteer Soldiers, who may become insane, shall, upon an order of the President of the Board of Managers of the said National Home, be admitted to the Government Hospital for the Insane and treated therein: *Provided*, That the Secretary of War may, in his discretion, contract for the care, maintenance, and treatment of the insane of the Army and inmates of the National Home for Disabled Volunteer Soldiers on the Pacific Coast at any State asylum in California, in all cases which he is authorized by law to cause to be sent to the Government Hospital for the Insane in the District of Columbia.

Transfer of in-  
mate convicts.

R. S., s. 4852.  
7 Aug., 1882, 22  
Stat. L., 329, c. 433;  
1 Supp., 382.

SEC. 8418. Upon the application of the Attorney-General the Secretary of the Interior is authorized and directed to transfer to the Government Hospital for the Insane in the District of Columbia all persons who, having been charged with offenses against the United States, are in the actual custody of its officers, and all persons who have been or shall be convicted of any offense in a court of the United States and are imprisoned in any State prison or penitentiary of any State or Territory, and who during the term of their imprisonment have or shall become and be insane.

Insane persons  
accused of crime.

R. S., s. 4851.  
17 A. G. Op. 211.

SEC. 8419. If any person, charged with crime, be found, in the court before which he is so charged, to be an insane person, such court shall certify the same to the Secretary of the Interior, who may order such person to be confined in the Hospital for the Insane, and, if he be not indigent, he and his estate shall be charged with expenses of his support in the hospital.

Insane prison-  
ers may be trans-  
ferred to State  
asylums.

23 June, 1874,  
18 Stat. L., 251, c.  
465, s. 2; 1 Supp.,  
47.

SEC. 8420. In all cases where any person convicted in a court of the United States shall, while imprisoned under such conviction in any State prison or penitentiary, become and be insane, and there shall not be accommodation for such insane person at the Government Hospital for the Insane, or if for other reasons the Attorney-General is of opinion that such insane person should be placed at a State insane asylum rather than at said Government Hospital, then the Attorney-General shall have power in his discretion to contract with any State insane or lunatic asylum, within the State in which such convict is impris-



oned, for his care and custody while remaining so insane; and in all cases where such convicts shall have been, or shall hereafter be, transferred to a State asylum for insane convicts, in accordance with the laws of such State, the Attorney-General is hereby authorized and directed to compensate the said asylum, or the proper authorities controlling the same, for the care and custody of such insane convicts, until their removal or discharge, in such amounts as he shall deem just and reasonable; but no contract shall be made or compensation paid for the care of such insane person beyond their respective terms of imprisonment.

SEC. 8421. Whenever such insane convict shall be restored to sanity, after he shall have been transferred under the provisions of the section last preceding, he shall be returned to the prison or penitentiary from which the transfer was made, provided the term of imprisonment shall not have expired. The question of sanity in all cases arising under this and the foregoing section shall be determined in accordance with the rules and regulations of existing laws, State or national, on that subject, applicable to the prison, penitentiary, or asylum where such convict shall be confined.

Convicts restored to sanity to be returned to prison.

23 June, 1874, 18 Stat. L., 252, c. 465, s. 3; 1 Supp., 47.

SEC. 8422. When any person confined in the Hospital for the Insane charged with crime and subject to be tried therefor, or convicted of crime and undergoing sentence therefor, shall be restored to sanity, the superintendent of the hospital shall give notice thereof to the judge of the criminal court, and deliver him to the court in obedience to the proper precept.

Delivery of insane criminals restored to sanity.

R. S., s. 4856.

SEC. 8423. No insane person not charged with any breach of the peace shall ever be confined in the United States jail in the District of Columbia.

Insane persons not to be confined to jail.

R. S., s. 4857.

SEC. 8424. All indigent insane persons residing in the District of Columbia at the time they became insane shall be entitled to the benefits of the Hospital for the Insane, and shall be admitted upon order of the Commissioners of the said District, which may be granted after due process of law, showing the person to be insane and unable to support himself and family, or himself, if he has no family, under the visitation of insanity: *Provided*, That one half of the expense of the indigent patients from the District of Columbia shall be reported to the Treasury Department and charged against the appropriations to be paid toward the expenses of the District by the general government without regard to the date of their admission.

Indigent insane of the District of Columbia.

R. S., s. 4844.  
3 Mar., 1877, 19 Stat. L., 347, c. 105; 1 Supp., 136.  
3 Mar., 1879, 20 Stat. L., 395, c. 182; 1 Supp., 252.

7 A. G. Op., 450.

SEC. 8425. The Commissioners of the District of Columbia may grant an order for the admission into the hospital of any insane person not charged with a breach of the peace, when he shall receive the certificate, as provided in the next section, of the judge of the equity court for the District of Columbia, and an application in writing, as provided in the next section, by a member of the board of visitors, requesting that such order may be issued.

Order of admission.

R. S., s. 4845.  
3 Mar., 1877, 19 Stat. L., 347, c. 105; 1 Supp., 136.  
31 Jan., 1899, 30 Stat. L., 811, c. 78; 2 Supp., 936.  
3 Mar., 1903, 32 Stat. L., 1043, c. 1006.

Certificate of  
judge.

R. S., s. 4846.  
31 Jan., 1899, 30  
Stat. L., 811, c. 78;  
2 Supp., 936.

3 Mar., 1903, 32  
Stat. L., 1043, c.  
1006.

SEC. 8426. It must appear by the certificate aforesaid that two respectable physicians, residents of the District, appeared before said judge and deposed, in writing sworn to and subscribed by them, that they knew the person alleged to be insane; that, from personal examination, they believed such person to be in fact insane, and a fit subject for treatment in said hospital, and that said person was a resident of the District at the time he was seized with the mental disorder under which he then labored. It must further appear by such certificate that two respectable householders, resident of the District, appeared before said judge and deposed, in writing sworn to and subscribed by them, that they knew the person alleged to be insane, and that, from a personal examination of his affairs, they believed said person to be unable, under the visitation of insanity, to support himself, and family, in case such person have a family, or to support himself alone, in case such person have no family, and unable to pay his board and other expenses in the hospital. The affidavits of said physicians and householders shall accompany the certificate of said judge.

Application by  
visitor.

R. S., s. 4847.  
31 Jan., 1899, 30  
Stat. L., 811, c. 78;  
2 Supp., 936.

3 Mar., 1903, 32  
Stat. L., 1043, c.  
1006.

SEC. 8427. The application by a member of the board of visitors must be made within five days after the date of the affidavits aforesaid, and it must appear therein that the visitor made the application after an inspection of the affidavits and certificate. It shall be the duty of such visitor to withhold his application, if he has reason to doubt the indigence of the party in whose behalf the application is desired, until his doubt is removed by satisfactory testimony.

Conveyance to  
hospital.

R. S., s. 4848.  
3 Mar., 1877, 19  
Stat. L., 347, c.  
105; 1 Supp., 136.

31 Jan., 1899, 30  
Stat. L., 811, c. 78;  
2 Supp., 936.

3 Mar., 1903, 32  
Stat. L., 1043, c.  
1006.

SEC. 8428. The order of the Commissioners of the District of Columbia, granted upon the certificate of a judge and the application of a member of the board of visitors, shall authorize any police officer or constable to assist in carrying such indigent insane person to the hospital, whenever such assistance is represented to be necessary by the person holding the order; but all the expenses of witnesses before the judge, and of carrying such patient to the hospital, shall be borne by his friends, or by the local authorities of the District.

Admission of  
insane persons  
having property.

R. S., s. 4849.

SEC. 8429. Whenever it appears in the case of any insane person whose insanity commenced while he was a resident of the District of Columbia, that he is able to defray a portion, but not the whole, of the expenses of his support and treatment in the Government Hospital for the Insane, the board of visitors of the hospital is authorized to inquire into the facts of the case; and if it appears to the board, upon such inquiry, that such insane person has property and no family, or has more property than is required for the support of his family, then, as a condition upon which such insane person admitted or to be admitted upon the order of the Commissioners of the District of Columbia, shall receive or continue to receive the benefits of the hospital, there shall be paid to the superintendent

ent from the income, property, or estate of such insane person such portion of his expenses in the hospital as a majority of the board shall determine to be just and reasonable, under all the circumstances.

SEC. 8430. Any indigent insane person who did not reside in the District at the time he became insane may, in like manner, upon the certificate of a judge and the application of a member of the board of visitors, be admitted into the hospital upon the application of the Commissioners of the District, and at the expense of the District during the continuance of such insane person therein, it being hereby designed to give the superintendent thereof authority to take charge of such insane person until the Commissioners can discover who his friends are, or whence he came, with a view to the return of such person to such friends, or to the place of his residence, and thus relieve the District of the expense and charge of such indigent insane nonresident.

Admission of  
indigent non-  
residents of Dis-  
trict.

R. S., s. 4850.

SEC. 8431. It shall be the duty of the Commissioners of the District of Columbia, so soon as practicable, to return to their places of residence or to their friends all indigent insane persons not residing in the District at the time they became insane who are now detained in the Government Hospital for the Insane, or who shall be committed to the said hospital to be temporarily cared for as provided in the foregoing section; and all necessary expenses incurred by the Commissioners in ascertaining the locality where such persons or their friends belong and in returning them to such locality shall be defrayed by the District of Columbia.

Return of indi-  
gent insane to  
residence.

31 Jan., 1899, 30  
Stat. L., § 11, c. 78,  
s. 7; 2 Supp., 987.

SEC. 8432. Whenever there are vacancies, private patients from the District may be received at a rate of board to be determined by the visitors, to be in no case less than the actual cost of their support.

Private pa-  
tients.

R. S., s. 583.

SEC. 8433. The independent or pay patients may be received into the hospital for the insane on the certificate of two respectable physicians of the District, stating that they have personally examined the patient, and believe him to be insane at the time of giving the certificate, and a fit subject for treatment in the institution, accompanied by a written request for the admission from the nearest relatives, legal guardian, or friend of the patient, and such proceedings had thereon as are pursued in the case of indigent insane persons; thereupon he may remain in said hospital until restored to reason. The friends of the patient shall comply with the regulations of the hospital in respect to payment of board, and in all other respects. The request for admission must be made within five days of the date of the certificate of insanity.

Admission of  
pay patients.

R. S., s. 5854.

SEC. 8434. If any person will give bond with sufficient security, to be approved by the Supreme Court of the District of Columbia, or by any judge thereof in vacation, payable to the United States, with condition to restrain and take care of any independent or indigent insane person not charged with a breach of the peace, whether in the

Discharge of  
patients upon  
bond.

R. S., s. 4856.

hospital or not, until the insane person is restored to sanity, such court or judge thereof may deliver such insane person to the party giving such bond.

Jury in proceedings for admission of insane.

7 July, 1898, 80 Stat. L., 686, c. 571; 2 Supp., 883.

SEC. 8435. In all proceedings by the Commissioners of the District of Columbia to commit resident indigent insane persons to the Government Hospital for the Insane, it shall be the duty of the marshal to impanel juries in such cases from the jurors in attendance upon the criminal courts of said District, who shall perform such service in addition to and as part of their duties in said courts: *Provided*, That during such time as jurors are not in attendance upon said criminal courts, the marshal may in such cases impanel the jurors in attendance upon the police court, who shall perform such duties in addition to and as part of their duties in said police court.

Arrest of insane persons in the District of Columbia.

27 Apr., 1904, 38 Stat. L., 316, c. 1618, s. 1.

SEC. 8436. Any member of the Metropolitan police of the District of Columbia, or any other officer in said District authorized to make arrests, is hereby authorized and empowered to apprehend and detain, without warrant, any insane person, or person of unsound mind found on any street, avenue, alley, or other public highway, or found in any public building or other public place within the District of Columbia; and it shall be the duty of the policeman or officer so apprehending or detaining any such person immediately to file his affidavit with the major and superintendent of said Metropolitan police that he believes the said person to be insane or of unsound mind, incapable of taking care of himself or his property, and, if permitted to remain at large, or to go unrestrained in the District of Columbia, the rights of person and of property will be jeopardized, or the preservation of public peace imperiled and the commission of crime rendered probable: *Provided, however*, That it shall be the duty of the major and superintendent of the said Metropolitan police forthwith to notify the husband or wife, or some near relative or friend of the person so apprehended and detained, whose address may be known to the said major and superintendent, or whose address can by reasonable inquiry be ascertained by him.

Arrest, etc., of indigent and insane persons.

27 Apr., 1904, 38 Stat. L., 317, c. 1618, s. 2.

SEC. 8437. The major and superintendent of said Metropolitan police is hereby authorized to order the apprehension and detention, without warrant, of any indigent person alleged to be insane or of unsound mind, or any alleged insane person of homicidal or otherwise dangerous tendencies, found elsewhere in the District of Columbia than in the places mentioned in the section last preceding, whenever two or more responsible residents of the District of Columbia shall make and file an affidavit with said major and superintendent of the Metropolitan police, setting forth that they believe the person therein named to be insane or of unsound mind, the length of time they have known such person, that they believe such person to be incapable of managing his or her own affairs, and that such person is not fit to be at large, or to go unrestrained, and, if such

person is permitted to remain at liberty in the District of Columbia, the rights of persons and of property will be jeopardized, or the preservation of the public peace imperiled and the commission of crime rendered probable, and that such person is a fit subject for treatment on account of his mental condition: *Provided, however,* That before the major and superintendent of the said Metropolitan police shall order the apprehension and detention of any person upon the affidavits of the aforesaid residents, or in case of arrest as provided in the section last preceding, he shall, in addition thereto, require the certificate of at least two physicians who shall certify that they have examined the person alleged to be insane or of unsound mind, and that such person should not be allowed to remain at liberty and go unrestrained, and that such person is a fit subject for treatment on account of his mental condition.

SEC. 8438. The Commissioners of the District of Columbia are hereby authorized to place in the Government Hospital for the Insane in said District, and the superintendent of said hospital is hereby authorized to receive, upon the written request of the said Commissioners, for a period of time not exceeding thirty days, indigent persons alleged to be insane or of unsound mind, residents of, or found within, the District of Columbia, and alleged insane persons of homicidal or otherwise dangerous tendencies, residents of, or found within, the said District so apprehended and detained, as provided in the two sections last preceding, pending the formal commitment of such persons to said hospital, as provided by law, or their transportation to their homes when their places of residence are ascertained by the proper officials charged by law with that duty.

Temporary detention at Government Hospital for Insane.

27 Apr., 1904, 33  
Stat. L., 317, c.  
6118, s. 8.

SEC. 8439. The Commissioners of the District of Columbia may authorize the temporary commitment of any of the above-mentioned insane persons or persons of unsound mind so apprehended and detained as provided in sections eighty-four hundred and thirty-six and eighty-four hundred and thirty-seven (for a period of time not exceeding thirty days) in any other hospital in said District which, in the judgment of the health officer of said District, is properly constructed and equipped for the reception and care of such persons, and the official in charge of which, for the time being, is willing to receive such persons pending the temporary commitment or the formal commitment of such persons, as provided by law, to the Government Hospital for the Insane or to any other hospital or insane asylum; or any such alleged insane person or person of unsound mind apprehended under sections eighty-four hundred and thirty-six and eighty-four hundred and thirty-seven, may be detained in any police station or house of detention in said District pending the completion of arrangements for his temporary detention in the Government Hospital for the Insane or any other hospital or insane asylum; and such persons may be de-

Temporary commitment in other hospitals, etc.

27 Apr., 1904, 33  
Stat. L., 317, c.  
1618, s. 4.

tained in any police station or house of detention in said District until formally committed to the Government Hospital for the Insane or any other hospital or asylum, in the manner provided by law, in case he can not be provided for by the said Government Hospital for the Insane and no arrangement can be made for his temporary detention in any other hospital or asylum: *Provided, however,* That if, pending the formal commitment of such alleged insane person or person of unsound mind to the Government Hospital for the Insane or to any other hospital or asylum, the superintendent of such Government Hospital for the Insane, in the case of the commitment of a person to said hospital under the provisions of this section and the three sections last preceding, or if two or more physicians in regular attendance at any other hospital or asylum where any person is committed under the provisions of said sections, or if two or more surgeons of the police and fire departments, in the case of any person detained at any police station or house of detention under the provisions of said sections, shall certify in writing to the Commissioners of the District of Columbia, that such person is not insane or that he has recovered his reason. the official in charge of the Government Hospital for the Insane or the hospital or asylum in which such person is confined, or the major and superintendent of said Metropolitan police, if such person be confined in a police station house or in a house of detention, shall discharge such alleged insane person or person of unsound mind forthwith and immediately report such action to the Commissioners of the District of Columbia.

Validity of certificates.

27 Apr., 1904,  
88 Stat. L., 318,  
c. 1618, s. 5.

SEC. 8440. For the purposes of the four sections last preceding no certificate as to the sanity or the insanity of any person shall be valid which has been issued (a) by a physician who has not been regularly licensed to practice medicine in the District of Columbia, unless he be a commissioned surgeon of the United States Army, Navy, or Public Health and Marine-Hospital Service; or (b) by a physician who is not a permanent resident of the District of Columbia; or (c) by a physician who has not been actively engaged in the practice of his profession for at least three years; or (d) by a physician who is related by blood or by marriage to the person whose mental condition is in question. Nor shall any certificate alleging the insanity of any person be valid which has been issued by a physician who is financially interested in the hospital or asylum in which the alleged insane person is to be confined, or who is professionally or officially connected therewith.

False affidavits and certificates; penalty.

27 Apr., 1904,  
88 Stat. L., 318,  
c. 1618, s. 6.

SEC. 8441. Whoever shall make an affidavit, as required by section eighty-four hundred and thirty-six or section eighty-four hundred and thirty-seven, by which he secures or attempts to secure the apprehension, detention, or restraint of any other person in the District of Columbia without probable cause for believing such person to be

insane or of unsound mind; or whoever, being a physician, shall knowingly make any false certificate as to the sanity or insanity of any other person shall be fined not more than five hundred dollars or imprisoned not more than three years, or both.

SEC. 8442. All appropriations of money by Congress for the support of the Hospital for the Insane shall be drawn from the Treasury on the requisition of the Secretary of the Interior, and shall be disbursed and accounted for in all respects according to the laws regulating ordinary disbursements of public money.

SEC. 8443. The surplus products and waste material of the hospital may be sold or exchanged for the benefit of the hospital, and proceeds to be used and accounted for the same as its other funds.

SEC. 8444. The superintendent of the Government Hospital for the Insane shall deposit in the Treasury of the United States, in his name as agent, all funds which may be intrusted to him by or for the use of patients, which shall be kept as a separate account; and he is hereby authorized to draw therefrom on his order, from time to time, under such regulations as the Secretary of the Interior may prescribe, for the use of such patients, but not to exceed for any one patient the amount intrusted to the superintendent on account of such patient; and he shall give a separate bond, satisfactory to the said Secretary, for the faithful performance of his duties in respect to these funds as herein provided.

Disbursements  
of appropriations.

R. S., s. 4858.

Proceeds of  
sale of waste material.

7 Aug., 1882,  
22 Stat. L., 330,  
c. 433; 1 Supp.,  
381.

Private funds  
of patients.

1 July, 1898, 30  
Stat. L., 623, c.  
546; 2 Supp., 377.

*Exhibit.*

## CERTIFICATE OF DEATH. DISTRICT OF COLUMBIA.

Dist. No. \_\_\_\_\_.  
 No. of burial permit \_\_\_\_\_.  
 Class No. \_\_\_\_\_.  
 No. of record \_\_\_\_\_.

Full instructions for the guidance of those using this blank, and space for remarks may be found on the other side.

1. Date of this death \_\_\_\_\_, 190—.
2. Full name of deceased, \_\_\_\_\_.  
 (If an unnamed infant, insert full names of both parents.)
- |         |            |           |                        |
|---------|------------|-----------|------------------------|
| 3. Sex: | 4. Age:    | 5. Color: | 6. Conjugal condition: |
| Male.   | Years, —.  | White.    | Single.                |
| Female. | Months, —. | Colored.  | Married.               |
|         | Days, —.   | Indian.   | Widowed.               |
|         |            | Chinese.  | Divorced.              |
|         |            | Japanese. |                        |

(Under sex, color, and conjugal condition strike out the words not applicable.)

(Under color, the term "colored" includes all of African descent, whether of pure or mixed blood.)

7. Occupation, \_\_\_\_\_.
8. Birthplace of deceased, \_\_\_\_\_.
9. Birthplace of father, \_\_\_\_\_.
10. Birthplace of mother, \_\_\_\_\_.
11. Duration of residence in this District, \_\_\_\_\_.
12. Place of death, \_\_\_\_\_.
13. Cause of death: \_\_\_\_\_
- |                   |       |
|-------------------|-------|
| Primary, _____.   | _____ |
| Immediate, _____. | _____ |
14. If death occurred in an institution, give—  
 Name of institution \_\_\_\_\_.  
 Length of time deceased was an inmate \_\_\_\_\_.
15. If deceased did not die at his or her residence, give—  
 Place of residence \_\_\_\_\_.
- I hereby certify that I attended the deceased professionally during \_\_\_\_\_ last illness.  
 \_\_\_\_\_, M. D.,  
 Address, \_\_\_\_\_.

## TO BE FILLED OUT AND SIGNED BY THE UNDERTAKER:

Place of burial, \_\_\_\_\_. Date of burial, \_\_\_\_\_ 190—.

## IF BODY IS TO BE BURIED OUTSIDE OF THE DISTRICT, STATE—

Route of transportation, \_\_\_\_\_. Date of removal, \_\_\_\_\_ 190—.

Signature, \_\_\_\_\_, Undertaker,  
 Address, \_\_\_\_\_.

## INSTRUCTIONS RELATIVE TO THE ISSUANCE OF DEATH CERTIFICATES.

1. Certificates should be filled out with ink, and should, as far as possible, contain all information called for.
2. Certificates which bear evidence of unauthorized alterations, or which are in any other manner materially defective, can not be admitted to record.
3. Apnoea, exhaustion, heart failure, coma, or any analogous condition, can not be recognized as in itself a cause of death when the cause from which it originates is not specified.
4. When death has occurred without the attendance of a physician, or when it is believed or known to have been due to other than natural causes, or when either the cause of death or the identity of the deceased is unknown, the death certificate must be signed by the coroner before a burial permit can be issued.
5. Place of death and place of residence should be described by street and number; if this can not be done, indicate it as accurately as possible.



6. When the cause of death is a disease or injury which may affect various parts of the body, as malignant growths, tuberculosis, etc., the death certificate should specify the part affected.

7. When death has occurred from a communicable disease, information should be furnished, if possible, relative to the place where such disease was contracted, if it was contracted elsewhere than at the place of death.

8. Remarks, if any, may be written in the space below, and should be dated and signed by the party responsible for them.

WM. C. WOODWARD, M. D.,  
*Health Officer.*

#### REMARKS.

[Extracts from "An Act for the regulation of cemeteries and the disposal of dead bodies in the District of Columbia."]

SEC. 6. That no dead body of any human being, or any part of such body, shall, in said District, be removed from place to place, interred, disinterred, or in any manner disposed of without a permit for such removal, interment, disinterment, or disposal granted by the health officer of said District, nor otherwise than in accordance with the terms of said permit; permits for the removal, interment, or disposal to be issued upon the presentation of a proper death certificate, signed by a physician, registered at the health department of said District, who has attended the deceased during his or her last illness, or by the coroner of said District or his deputy, or by the proper municipal, county, or State authorities at the place where the death occurred.

SEC. 8. That it shall be the duty of any person or persons having custody or control of the dead body of any human being, or any part of such body, to report in writing, or cause to be reported in writing, to the health officer of said District within forty-eight hours after the death of the deceased, the name of said deceased and the location of the body or part thereof.

SEC. 14. That it shall be unlawful for any person or persons to cremate or otherwise destroy the dead body, or part of the dead body of any human being in said District before the issue of the burial permit by the health officer of said District, and then only when said permit is countersigned by the coroner of said District authorizing such cremation or destruction. It shall be unlawful for any person or persons to embalm, inject, or by any similar method preserve the dead body or part of the dead body of any human being in said District within four hours after death before the issue of the death certificate; and in case the death is believed to be due to other than natural causes, or the cause thereof is unknown, such embalming, injecting, or preserving shall at no time be done unless such death certificate has been signed or approved by the coroner of said District.

Approved, January 25, 1898.

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*Office hours.*—The health department is open for the issuance of burial permits, the receipt of complaints, and the transaction of any urgent business, from nine o'clock a. m. until eleven o'clock p. m., except on Sundays and legal holidays, when it is open only from ten o'clock a. m. until noon, and from six o'clock p. m. until eight o'clock p. m.



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- (14) Stockton State Hospital, Stockton, Cal., Dr. Asa Clark, medical superintendent, dated January 6, 1906.
- (15) South Dakota State Hospital, Yankton, S. Dak., Dr. L. C. Mead, superintendent, dated November 23, 1905.
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- (17) Medfield Insane Asylum, Harding, Mass., Dr. Edward French, superintendent, dated January 1, 1906.
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- (20) Middletown State Homeopathic Hospital, Middletown, N. Y., Dr. M. C. Ashley, superintendent, dated January 3, 1906.
- (21) Rochester State Hospital, Rochester, N. Y., Dr. E. H. Howard, superintendent, dated December 30, 1905.
- (22) Hudson River State Hospital, Poughkeepsie, N. Y., Dr. Charles W. Pilgrim, superintendent, dated January 2, 1906.
- (23) Buffalo State Hospital, Buffalo, N. Y., Dr. Arthur W. Hurd, superintendent, dated November 7, 1905.
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- (29) Longview Hospital, Cincinnati, Ohio, Dr. F. W. Harmon, superintendent, dated January 5, 1906.
- (30) Cleveland State Hospital, Cleveland, Ohio, Dr. A. B. Howard, superintendent, dated December 11, 1905.
- (31) Dayton State Hospital, Dayton, Ohio, Dr. A. F. Shepherd, superintendent, dated November 23, 1905.
- (32) Massillon State Hospital, Massillon, Ohio, Dr. Henry C. Eymann, superintendent, dated January 2, 1905.
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  - (20) Middletown State Homeopathic Hospital, Middletown, N. Y., Dr. M. C. Ashley, superintendent, dated January 3, 1906.

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- (24) Kings Park State Hospital, Kings Park, N. Y., Dr. W. A. Macy, superintendent, dated January 2, 1906.
- (25) Gowanda State Homeopathic Hospital, Gowanda, N. Y., D. H. Arthur, superintendent, dated January 2, 1906.
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- (27) Willard State Hospital, Willard, N. Y., Dr. Robert M. Elliott, superintendent, dated November 8, 1905.
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- (30) Cleveland State Hospital, Cleveland, Ohio, Dr. A. B. Howard, superintendent, dated December 11, 1905.
- (31) Dayton State Hospital, Dayton, Ohio, Dr. A. F. Shepherd, superintendent, dated November 23, 1905.
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- (2) State Hospital, Warren, Pa.; Dr. Morris S. Guth, superintendent, dated December 29, 1905.
- (3) Springfield State Hospital, Sykesville, Md.; Dr. J. Clement Clark, superintendent, dated January 15, 1906.
- (4) Hastings State Asylum, Hastings, Minn.; W. J. Zang, superintendent; dated November 13, 1905.
- (5) Osawatimie State Hospital, Osawatimie, Kans.; D. L. L. Uhls, superintendent; dated January 1, 1906.
- (6) Independence State Hospital, Independence, Iowa; Dr. W. P. Crumbacker, superintendent; dated January 5, 1906.
- (7) Western Washington Hospital for Insane, Fort Steilacoom, Wash.; E. Van Zandt, superintendent; dated January 8, 1906.
- (8) Western Hospital for Insane, Bolivar, Tenn.; D. J. J. Neely, superintendent; dated March 6, 1906.
- (9) Mount Pleasant State Hospital, Mount Pleasant, Iowa; Dr. C. F. Applegate, superintendent; dated January 4, 1906.
- (10) Georgia State Sanitarium, Milledgeville, Ga.; H. S. James, secretary; dated November 14, 1905.
- (11) Eastern State Hospital, Williamsburg, Va.; Dr. L. S. Foster, superintendent; dated January 9, 1906.
- (12) State Hospital for the Insane of North Dakota, Jamestown, N. Dak.; Dr. D. S. Moore, superintendent; dated November 14, 1905.
- (13) Connecticut Hospital for the Insane, Middletown, Conn.; Dr. Henry S. Noble, superintendent; dated November 24, 1905.
- (14) Stockton State Hospital, Stockton, Cal.; Dr. Asa Clark, medical superintendent; dated January 6, 1906.
- (15) South Dakota State Hospital, Yankton, S. Dak.; Dr. L. C. Mead, superintendent; dated November 23, 1905.
- (16) Eastern Kentucky Asylum for the Insane, Lexington, Ky.; Dr. J. S. Redwine, superintendent; dated November 15, 1905.
- (17) Medfield Insane Asylum, Harding, Mass.; Dr. Edward French, superintendent; dated January 1, 1906.
- (18) Eastern Indiana Hospital for the Insane, Easthaven, Ind.; Dr. S. E. Smith, superintendent; dated December 30, 1905.
- (19) Northern Indiana Hospital for Insane, Logansport, Ind.; Dr. J. G. Rogers, medical superintendent; dated January 1, 1905.
- (20) Middletown State Homeopathic Hospital, Middletown, N. Y.; Dr. M. C. Ashley, superintendent; dated January 3, 1906.
- (21) Rochester State Hospital, Rochester, N. Y.; Dr. E. H. Howard, superintendent; dated December 30, 1905.
- (22) Hudson River State Hospital, Poughkeepsie, N. Y.; Dr. Charles W. Pilgrim, superintendent; dated January 2, 1906.
- (23) Buffalo State Hospital, Buffalo, N. Y.; Dr. Arthur W. Hurd, superintendent; dated November 7, 1905.
- (24) Kings Park State Hospital, Kings Park, N. Y.; Dr. W. A. Macy, superintendent; dated January 2, 1906.
- (25) Gowanda State Homeopathic Hospital, Gowanda, N. Y.; D. H. Arthur, superintendent; dated January 2, 1906.
- (26) Mattewan State Hospital, Fishkill-on-Hudson, N. Y.; Dr. Robert M. Lamb, medical superintendent; dated January 1, 1906.
- (27) Willard State Hospital, Willard, N. Y.; Dr. Robert M. Elliott, superintendent; dated November 8, 1905.

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Letter of, to Dr. C. M. Emmons, secretary of Medico-Legal Society, dated May 29, 1906, as to abolition of mechanical restraint and operation of eight-hour schedule at that institution.....	997

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